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| Fill in this information to identify your case:                                 |  |
|---|--|
| United States Bankruptcy Court for the:  Northern District of: Illinois (State) |  |
| Case number (if known)  | Chapter you are filing under:              |
|   | Chapter 7 Chapter 11 Chapter 12 Chapter 13 |

#### Official Form 101

### Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| 1. Your full name  Latasha  |                        |
|---|------------------------|
|   |                        |
| First name Write the name that is on  | First name             |
| your government-issued picture identification (for example, your driver's license or passport  L.  Middle name  Conley  Last name | Middle name  Last name |
| Bring your picture identification to your meeting with the trustee.   |                        |
| All other names you have used in the last     8 years   | First name             |
| Middle name Include your married or   | Middle name            |
| maiden names.  Last name  | Last name              |
| First name  | First name             |
| Middle name   | Middle name            |
| Last name   | Last name              |
| 3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)              | 0120                   |

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| Debtor 1 Latasha<br>First Name                     |              | L.<br>Middle Name  | Conley<br>Last Name   | Case number (if k   | known)   |  |
|--|--------------|--|---|---------------------|--|--|
| FIISLINAITIE                                       |              | Middle Name  | Last Marrie   |                     |  |  |
|  | ,            | About Debtor 1:  |   | About Debt          | tor 2 (Spouse Only in  | n a Joint Case):                             |
| Any business n     and Employer                    | names [      | I have not used any busin  | ess names or EINs.  | I have no           | ot used any business na                                      | mes or EINs.                                 |
| Identification<br>Numbers (EIN)<br>have used in th | , you        | Business name  |   | Business na         | ame  |  |
| 8 years  | Ē            | Business name  |   | Business na         | ame  |  |
| Include trade nam<br>doing business as             |              | EIN  |   | EIN                 |  |  |
|  | Ē            | EIN  |   | EIN                 |  |  |
| 5. Where you live                                  | •            |  |   | If Debtor 2 I       | lives at a different addr                                    | ess:   |
|  | _            | 5507 W Gladys Ave Apt 1<br>Number Street   |   | Number              | Street   |  |
|  |              | Chicago Illinois   | 60644   | C:t-                | Chata  | 7in Ondo                                     |
|  |              | City State Cook  | Zip Code  | City                | State  | Zip Code                                     |
|  | ŀ            | County<br><b>If your mailing address is d</b><br><b>above, fill it in here.</b> Note tha |   |                     | s mailing address is d<br>. Note that the court wi           |  |
|  |              | notices to you at this mailing a   |   | this mailing a      | ddress.  | il seria ariy riolices to                    |
|  | <u>1</u>     | Number Street  |   | Number              | Street   |  |
|  | <del>-</del> | 0.1  | 7. 0. 1.  | 011                 | 01.11  | 7'. 0. 4                                     |
|  |              | City State   | Zip Code  | City                | State  | Zip Code                                     |
| 6. Why you are choosing this o                     | district     | Check one:   |   | Check one:          |  |  |
| to file for bank                                   | ruptcy [     | Over the last 180 days bef lived in this district longer to                              | fore filing this petition, I have than in any other district. | Over the lived in t | e last 180 days before filir<br>this district longer than in | ng this petition, I have any other district. |
|  | [            | I have another reason. Exp   | blain. (See 28 U.S.C. §§ 1408.)                               | I have ar           | nother reason. Explain. (S                                   | See 28 U.S.C. §§ 1408.)                      |
|  | _            | _  |   |                     |  |  |
|  | -            |  |   |                     |  |  |
|  | _            |  |   |                     |  |  |
|  | -            |  |   |                     |  |  |
|  |              |  |   |                     |  |  |

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| Debtor 1 Latasha  | L.   |   | ase number (if known)   |
|---|--|---|---|
| First Name  | Middle Name  |   |   |
| Part 2: Tell the Court Abo  | out Your Bankrupto   | cy Case   |   |
| <ol> <li>The chapter of the<br/>Bankruptcy Code you<br/>are choosing to file<br/>under</li> </ol>   |  | brief description of each, see <i>Notice Requii</i><br>B2010)). Also, go to the top of page 1 and o   | red by 11 U.S.C. § 342(b) for Individuals Filing for check the appropriate box.                         |
| 8. How you will pay the fee   | more details at cashier's check may pay with a line of to pay to line of the l | bout how you may pay. Typically, if you ck, or money order. If your attorney is su a credit card or check with a pre-printed the fee in installments. If you choose the Pay Your Filing Fee in Installments (Off the the time of time | his option, sign and attach the Application for   |
| 9. Have you filed for bankruptcy within the last 8 years?   | ✓ No.  Yes. District  District  District   | When When When When   | Case number  MM / DD / YYYY  Case number  MM / DD / YYYY  Case number  MM / DD / YYYYY                  |
| 10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | Yes. Debtor  | When  | Relationship to you  Case number, if known  Relationship to you  Case number, if known  MM / DD / YYYYY |
| 11. Do you rent your residence?   | ✓ No. (  | landlord obtained an eviction judgment aga<br>Go to line 12.  | ainst you?<br>Sudgment Against You (Form 101A) and file it with   |

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| Debtor 1 Latasha  |  |                  | L.  | ddle Name                                      | Conley  | Case numb  | oer (if known)   |   |
|---|--|------------------|---|--|---|--|--|---|
| Part 3: Report A  | About Any                                  | Busir            |   | s You Own as a Sole                            | Last Name  e Proprietor   |  |  |   |
| 12. Are you a sol<br>proprietor of<br>or part-time  |  |                  | No.<br>Yes.   | Go to Part 4.                                  | of business   |  |  |   |
| business?   |  | Ц                | 163.  | Name and location of                           | or business   |  |  |   |
| A sole proprie  | -  |                  |   | Name of business, if                           | any   |  |  |   |
| operate as an<br>individual, an<br>separate legal<br>such as a corp<br>partnership, c           | entity<br>ooration,                        |                  |   | Number   | Street  |  |  |   |
| If you have me  | ore than                                   |                  |   | City   |   | State  | Zip Code   |   |
| proprietorship<br>separate shee   |  |                  |   | Check the appropr                              |   |  |  |   |
| attach it to the petition.  | is   |                  |   | _  | Business (as define   | _  |  |   |
| petition.   |  |                  |   | Real Estate (as defi                           | _   | 101(51B))  |  |   |
|   |  |                  |   | _  | (as defined in 11 U<br>roker (as defined i  |  | 6))  |   |
|   |  |                  |   | None of the a                                  | •   | 11 11 0.0.0. 3 101(  | 0))  |   |
| -   | of the Code and all tor? on of s debtor, § | appir shee exist | ropriate<br>t, state<br>t, follow<br>No.<br>No.<br>Yes. | I am filing under Cha<br>Bankruptcy Code.      | cate that you are a ash-flow statement, U.S.C. § 11 16(1)(B) Chapter 11. apter 11, but I am N | small business der<br>and federal incom<br>).<br>NOT a small busine<br>a small business de | btor, you must attach<br>ne tax return or if any<br>ass debtor according | your most recent balance of these documents do not to the definition in the edefinition in the Bankruptcy |
| any property  | that                                       | <b>✓</b>         | No.   | NAME of the first second                       |   |  |  |   |
| poses or is all<br>pose a threat<br>imminent and  | of   | Ц                | res.  | What is the hazard?  If immediate attention is | e needed why is it n  | eeded?   |  |   |
| identifiable h  | or   |                  |   | Tillimodiate attention to                      |   |  |  |   |
| safety? Or do<br>own any prop<br>that needs in<br>attention?                                    | perty                                      |                  |   | Where is the property?                         | Number  | Street   |  |   |
| For example,<br>own perishab<br>or livestock th<br>be fed, or a be<br>that needs un<br>repairs? | le goods,<br>nat must<br>uilding           |                  |   |  | City  | s  | State  | Zip Code  |

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Debtor 1 Latasha L. Conley Case number (if known)
First Name Middle Name Last Name

#### Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment plan. Attach a copy of the certificate and the payment plan. The law requires that if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you are not eligible to file. I certify that I asked for credit counseling services I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. My physical disability causes me to Disability. My physical disability causes me to Disability. be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for waiver of credit counseling with the court. waiver of credit counseling with the court.

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| Debtor 1 Latasha  | L.  | Conley  | Case number  | (if known)   |
|---|---|---|--|--|
| Part 6: First Name  Answer These Que  | Middle Name estions for Reporting   | Last Name  Purposes   |  |  |
| 16. What kind of debts do you have?   | 16a. Are your debts "incurred by ar No. Go to lead to | s primarily consument individual primarily line 16b. line 17. s primarily business usiness or investment line 16c. line 17. | for a personal, family, or sidebts? Business debts a   | are debts that you incurred to obtain of the business or investment.             |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | Yes. I am filing un expenses ar   | g under Chapter 7. Go<br>der Chapter 7. Do you<br>e paid that funds will b  |  | npt property is excluded and administrative nsecured creditors?                  |
| 18. How many creditors do you estimate that you owe?  | ✓ 1-49<br>☐ 50-99<br>☐ 100-199<br>☐ 200-999   |   | 1,000-5,000<br>5,001-10,000<br>10,001-25,000   | 25,001-50,000<br>50,001-100,000<br>More than 100,000                             |
| 19. How much do you estimate your assets to be worth?   | \$0-\$50,000<br>\$50,001-\$100,0<br>\$100,001-\$500,<br>\$500,001-\$1 mi  | ,000  | \$1,000,001-\$10 million<br>\$10,000,001-\$50 million<br>\$50,000,001-\$100 million<br>\$100,000,001-\$500 million                                 | on \$10,000,000,001-\$50 billion   |
| 20. How much do you estimate your liabilities to be?  | \$0-\$50,000<br>\$50,001-\$100,0<br>\$100,001-\$500<br>\$500,001-\$1 mi   | ,000  | \$1,000,001-\$10 million<br>\$10,000,001-\$50 millior<br>\$50,000,001-\$100 million<br>\$100,000,001-\$500 mill                                    | on \$10,000,000,001-\$50 billion   |
| Part 7: Sign Below  |   |   |  |  |
| For you   | correct.  If I have chosen to fi of title 11, United St under Chapter 7.  If no attorney repres out this document, I I request relief in accordance.  | le under Chapter 7, I<br>ates Code. I underst<br>ents me and I did no<br>have obtained and r<br>cordance with the cha       | am aware that I may proc<br>and the relief available un<br>t pay or agree to pay som<br>ead the notice required by<br>apter of title 11, United Si | ates Code, specified in this petition.   |
|   | connection with a baboth. 18 U.S.C. §§ 1  | ankruptcy case can r  | esult in fines up to \$250,0<br>13571.   | aining money or property by fraud in 000, or imprisonment for up to 20 years, or |
|   | /s/ Latasha Cor   | •   | Signa  | ature of Debtor 2  |
|   | Executed on _   | 12/16/2017<br>MM / DD / YYYY  | •  | cuted on   |

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| Debtor 1 Latasha                                 | L.                        | Conley                 | Case number (if k            | anown)  |
|--|---------------------------|------------------------|------------------------------|---|
| First Name                                       | Middle Name               | Last Name              |                              |   |
| For your attorney, if you are represented by one | eligibility to proceed ur | nder Chapter 7, 11, 1  | 2, or 13 of title 11, United | ave informed the debtor(s) about<br>d States Code, and have explained the<br>lso certify that I have delivered to the |
| If you are not                                   | debtor(s) the notice req  | uired by 11 U.S.C. §   | 342(b) and, in a case in w   | hich § 707(b)(4)(D) applies, certify that I   |
| represented by an                                | have no knowledge afte    | er an inquiry that the | information in the schedu    | ules filed with the petition is incorrect.  |
| attorney, you do not                             | 4.4                       |                        |                              |   |
| need to file this page.                          | /s/ Jason Diaz            |                        | Date                         | 12/16/2017  |
|  | Signature of Attorney     | for Debtor             | M                            | M / DD / YYYY   |
|  |                           |                        |                              |   |
|  |                           |                        |                              |   |
|  | Jason Diaz                |                        |                              |   |
|  | Printed name              |                        |                              |   |
|  | Semrad Law Firm           |                        |                              |   |
|  | Firm name                 |                        |                              |   |
|  | 20 S. Clark Street        |                        |                              |   |
|  | Street                    |                        |                              |   |
|  | 28th Floor                |                        |                              |   |
|  |                           |                        |                              |   |
|  | Chicago                   |                        | Illinois                     | 60603   |
|  | City                      |                        | State                        | Zip Code  |
|  |                           |                        |                              |   |
|  | Contact phone             | 3129130625             | Email address                | jdiaz@semradlaw.com   |
|  |                           |                        |                              |   |
|  |                           |                        | Illinois                     |   |
|  | Bar number                |                        | State                        |   |

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| Fill in this infor                      | mation to identify your c | ase:        |                      |
|---|---------------------------|-------------|----------------------|
| Debtor 1                                | Latasha                   | L.          | Conley               |
|   | First Name                | Middle Name | Last Name            |
| Debtor 2                                |                           |             |                      |
| (Spouse, if filing)                     | First Name                | Middle Name | Last Name            |
| United States Bankruptcy Court for the: |                           | Northern    | District of Illinois |
|   |                           |             | (State)              |
| Case number (If known)                  |                           |             |                      |

| П | Check if this is an |
|---|---------------------|
|   | amended filing      |

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| Part 1: Summarize Your Assets   |   |
|---|---|
|   | Your assets<br>Value of what you own      |
| . Schedule A/B: Property (Official Form 106A/B)   | \$0.00                                    |
| 1a. Copy line 55, Total real estate, from Schedule A/B  | 40.00                                     |
| 1b. Copy line 62, Total personal property, from Schedule A/B  | \$16,425.00                               |
| 1c. Copy line 63, Total of all property on Schedule A/B   | \$16,425.00                               |
| Part 2: Summarize Your Liabilities  |   |
|   | <b>Your liabilities</b><br>Amount you owe |
| 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$11,670.00                               |
| 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)   | \$0.00                                    |
| 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F  |   |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F   | \$24,616.00                               |
| Your total liabilities  | \$36,286.00                               |
| Part 3: Summarize Your Income and Expenses  |   |
| Cummariae roun mountains and appropria  |   |
| 4. Schedule I: Your Income (Official Form 106I)   | \$2,927.00                                |
| Copy your combined monthly income from line 12 of Schedule I  |   |
|   |   |
| 5. Schedule J: Your Expenses (Official Form 106J)   | \$2,752.00                                |

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Conley Debtor 1 Latasha \_ Case number (if known) Middle Name First Name Last Name Part 4: **Answer These Questions for Administrative and Statistical Records** 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes. 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$2,403.75 Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: From Part 4 on Schedule E/F, copy the following: **Total claim** \$0.00 9a. Domestic support obligations (Copy line 6a.) \$0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$0.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$0.00 9d. Student loans. (Copy line 6f.) \$0.00 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) \$0.00 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

\$0.00

9g. Total. Add lines 9a through 9f.

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| Fill in this                       | information                                    | to identify your c   | ase.   |                        |  |  |   |
|------------------------------------|--|--|--|------------------------|--|--|---|
|                                    |  | to laeritily your ca   | ase.   |                        |  |  |   |
| Debtor 1                           | Latas<br>First N                               |  | L.<br>Middle N   | lama                   | Conley  Last Name  |  |   |
| Debtor 2                           | FIISL I  | van 10   | iviluale N   | anne                   | Lastivaille  |  |   |
| (Spouse, if fi                     | iling) First N                                 | Name   | Middle N   | lame                   | Last Name  |  |   |
| United Sta                         | ates Bankrup                                   | tcy Court for the:   | Northern   |                        | District of Illinois   |  |   |
| Case nun                           | nher   |  |  |                        | (State)  |  |   |
| (If known)                         |  |  |  |                        |  |  |   |
| Officia                            | al Form  | 106A/B   |  |                        | _  |  | Check if this is an amended filing                      |
|                                    |  |  | sets a   |                        |  |  | · ·   |
|                                    |  | B: Prope   |  |                        |  |  | 12/   |
| category<br>responsib<br>write you | where you the<br>le for supply<br>r name and o | nink it fits best. E<br>ing correct infor<br>case number (if k | Be as complete a<br>mation. If more s<br>nown). Answer e | nd ace<br>pace<br>very | asset only once. If an asset fits in more to<br>ccurate as possible. If two married people<br>is needed, attach a separate sheet to thi<br>question.<br>r Other Real Estate You Own or Hav | are filing together, both<br>is form. On the top of any  | are equally   |
| _                                  |  |  | juitable interest i                                      | in an                  | y residence, building, land, or similar prop   | perty?   |   |
| <u> </u>                           | No. Go to F                                    |  |  |                        |  |  |   |
|                                    | Yes. Where                                     | is the property?   |  |                        |  |  |   |
| 1.1                                |  |  |  | Wh                     | at is the property? Check all that apply. Single-family home   | the amount of any se   | d claims or exemptions. Put cured claims on Schedule D: |
|                                    | Street addre                                   | ss, if available, or   | other description  | H                      | Duplex or multi-unit building  | Creditors Who Have C   | Claims Secured by Property.                             |
|                                    |  |  |  | H                      | Condominium or cooperative   | Current value of the   |   |
|                                    |  |  |  | Ħ                      | Manufactured or mobile home  | entire property?   | portion you own?  |
|                                    | Number   | Street   |  |                        | Land   | Describe the meture  | .f  |
|                                    | Number   | Sileet   |  |                        | Investment property  | Describe the nature<br>interest (such as fee   | of your ownersnip<br>simple, tenancy by                 |
|                                    | City   | State  | Zip Code   | Ш                      | Timeshare Other  | the entireties, or a l   | ife estate), if known.                                  |
|                                    | ·  |  | ·  | Wh<br>one              | o has an interest in the property? Check   | Check if this is (see instruction  | community property<br>s)                                |
|                                    |  |  |  |                        | Debtor 1 only  | Ш  |   |
|                                    |  |  |  | Ħ                      | Debtor 2 only  |  |   |
|                                    |  |  |  | Ħ                      | Debtor 1 and Debtor 2 only   |  |   |
|                                    |  |  |  |                        | At least one of the debtors and another  |  |   |
|                                    |  |  |  |                        | er information you wish to add about this  | item, such as local  |   |
| If you                             | own or have                                    | more than one, li  | st here:   | pro                    | perty identification number:   |  |   |
| ,00                                | own or nave                                    | THOIC trail one, in  | ot 11010.  | Wh                     | at is the property? Check all that apply.  | Do not deduct secure   | d claims or exemptions. Put                             |
| 1.2                                | Street addre                                   | ss, if available, or   | other description  |                        | Single-family home   |  | cured claims on Schedule D: Claims Secured by Property. |
|                                    | Olicet addie                                   | ss, ii avallable, or   | other description  |                        | Duplex or multi-unit building  | Current value of the   |   |
|                                    |  |  |  |                        | Condominium or cooperative   | entire property?   | portion you own?  |
|                                    |  |  |  |                        | Manufactured or mobile home Land   |  |   |
|                                    | Number   | Street   |  | Н                      | Investment property  | Describe the nature  |   |
|                                    |  |  |  | H                      | Timeshare  |  | e simple, tenancy by ife estate), if known.             |
|                                    | City   | State  | Zip Code   |                        | Other  |  | <del></del>   |
|                                    |  |  |  | <b>Wh</b>              | o has an interest in the property? Check   | Check if this is of the contraction of the contract | community property<br>s)                                |
|                                    |  |  |  |                        | Debtor 1 only  | _  |   |
|                                    |  |  |  |                        | Debtor 2 only  |  |   |
|                                    |  |  |  |                        | Debtor 1 and Debtor 2 only   |  |   |
|                                    |  |  |  | П                      | At least one of the debtors and another  |  |   |
|                                    |  |  |  |                        | er information you wish to add about this<br>perty identification number:  | item, such as local  |   |

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| ebtor 1 Latasha  | L.<br>Middle Name  | Conley Case numb  | oer (if known)  |   |
|--|--|---|---|---|
| Street address, if available,  Number Street  City State | or other description   | Conley Last Name  What is the property? Check all that apply.  Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Other  Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property?  Describe the nature of interest (such as fee sthe entireties, or a life.) | simple, tenancy by  |
| t 2: Describe Your Velyou own, lease, or have leg        | ne portion you own for a  1. Write that number h hicles al or equitable interest | □□ Other information you wish to add about this iten property identification number: all of your entries from Part 1, including any entr  | ies for pages   |   |
| ars, vans, trucks, tractors, sp  No  Yes                 | •  | ·   | a Grioxpiloa Edados.  |   |
| 3.1 Make Model: Year: Approximate mileage:               | Dodge Charger 2011 90000   | Who has an interest in the property? Check one.  Debtor 1 only  | the amount of any sector<br>Creditors Who Have Classifications  | claims or exemptions. Fured claims on Schedule aims Secured by Property             |
| Other information:                                       |  | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)   | Current value of the entire property? \$11400.00  | Current value of the portion you own? \$11400.00                                    |
| 3.2 Make<br>Model:<br>Year:                              | Pontiac<br>Grand Prix<br>2002  | Who has an interest in the property? Check one.  Debtor 1 only  | the amount of any seco  | claims or exemptions. I<br>ured claims on <i>Schedula</i><br>aims Secured by Proper |
| Approximate mileage: Other information:                  | 100000   | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  | Current value of the entire property? \$2225.00   | Current value of the portion you own? \$2225.00                                     |
|  |  | Check if this is community property (see instructions)  |   |   |

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| ו וטוט            | Latasha<br>First Name   | L.<br>Middle Name | Conley  Last Name   | Case numbe  | ei ( <i>II Kriown</i> )   |   |
|-------------------|---|-------------------|---|---|---|---|
|                   |   | Middle Name       |   |   |   |   |
| 3.3               | Make  |                   | Who has an interest in the pro  | operty? Check   | Do not deduct secured   | •   |
|                   | Model:<br>Year:   |                   | one.  |   | the amount of any secu  | ned claims on <i>Scredule</i><br>nims Secured by Propert  |
|                   | Approximate mileage:  |                   | Debtor 1 only   |   | oroditoro virio riavo ola   | anno occured by Troport   |
|                   | Approximate initiage.   |                   | Debtor 2 only   |   | Current value of the  | Current value of the  |
|                   | Other information:  |                   | Debtor 1 and Debtor 2 only  |   | entire property?  | portion you own?  |
|                   |   |                   | At least one of the debtors a   | and another   |   |   |
|                   |   |                   | Check if this is communit   | y property (see   |   |   |
|                   |   |                   | instructions)   |   |   |   |
| 3.4               | Make  |                   | Who has an interest in the pro  | operty? Check   | Do not deduct secured   | claims or exemptions. F   |
|                   | Model:  |                   | one.  |   | the amount of any secu  |   |
|                   | Year:   |                   | Debtor 1 only   |   | Creditors Who Have Cla  | nims Secured by Propert   |
|                   | Approximate mileage:  |                   | Debtor 2 only   |   | Current value of the  | Current value of the  |
|                   | Other information:  |                   | Debtor 1 and Debtor 2 only  |   | entire property?  | portion you own?  |
|                   |   |                   | At least one of the debtors a   | and another   |   |   |
|                   |   |                   | Check if this is communit   | y property (see   |   |   |
|                   |   |                   |   |   |   |   |
|                   |   |                   | instructions)  ner recreational vehicles, other vents, fishing vessels, snowmobiles, mo   |   |   |   |
| Exa               | mples: Boats, trailers, motors<br>No<br>Yes   |                   | instructions)   | otorcycle accessori                                     | Do not deduct secured the amount of any secu  | ıred claims on <i>Schedule</i>  |
| Example Example 1 | mples: Boats, trailers, motors No Yes Make Model: Year:   |                   | instructions)  ner recreational vehicles, other vents, fishing vessels, snowmobiles, mo   | otorcycle accessori                                     | Do not deduct secured the amount of any secu  | •   |
| Example Example 1 | mples: Boats, trailers, motors<br>No<br>Yes<br>Make<br>Model:   |                   | who has an interest in the property   | otorcycle accessori                                     | Do not deduct secured the amount of any secu  | ıred claims on <i>Schedule</i>  |
| Example Example 1 | mples: Boats, trailers, motors No Yes Make Model: Year:   |                   | who has an interest in the property one.  Debtor 1 only   | otorcycle accessori                                     | Do not deduct secured the amount of any secu Creditors Who Have Cla   | red claims on Schedule<br>ims Secured by Propert  |
| Example Example 1 | mples: Boats, trailers, motors  No  Yes  Make  Model:  Year:  Approximate mileage:  |                   | who has an interest in the proone.  Debtor 1 only Debtor 2 only   | otorcycle accessori                                     | Do not deduct secured the amount of any secu Creditors Who Have Cla   | rred claims on Schedule<br>nims Secured by Propert<br>Current value of the  |
| Example Example 1 | mples: Boats, trailers, motors  No  Yes  Make  Model:  Year:  Approximate mileage:  |                   | who has an interest in the proone.  Debtor 1 only Debtor 2 only At least one of the debtors a   | otorcycle accessori                                     | Do not deduct secured the amount of any secu Creditors Who Have Cla   | rred claims on Schedule<br>nims Secured by Propert<br>Current value of the  |
| Example Example 1 | mples: Boats, trailers, motors  No  Yes  Make  Model:  Year:  Approximate mileage:  |                   | who has an interest in the proone.  Debtor 1 only Debtor 1 and Debtor 2 only  | otorcycle accessori                                     | Do not deduct secured the amount of any secu Creditors Who Have Cla   | rred claims on Schedule<br>nims Secured by Propert<br>Current value of the  |
| 4.1               | mples: Boats, trailers, motors  No  Yes  Make  Model:  Year:  Approximate mileage:  |                   | who has an interest in the proone.  Debtor 1 only Debtor 2 only At least one of the debtors a  Check if this is communit  | operty? Check and another y property (see               | Do not deduct secured the amount of any secu Creditors Who Have Cla   | rred claims on Schedule<br>nims Secured by Propert<br>Current value of the  |
| 4.1               | mples: Boats, trailers, motors  No  Yes  Make  Model:  Year:  Approximate mileage:  Other information:  Make  Model:                        |                   | who has an interest in the property one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors at instructions)   | operty? Check and another y property (see               | Do not deduct secured the amount of any secu Creditors Who Have Cla  Current value of the entire property?  Do not deduct secured the amount of any secu  | red claims on Schedule hims Secured by Propert Current value of the portion you own?  claims or exemptions. For the claims on Schedule  |
| 4.1               | mples: Boats, trailers, motors  No  Yes  Make  Model:  Year:  Approximate mileage:  Other information:  Make  Model:  Year:                 |                   | who has an interest in the property one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors at instructions)  Who has an interest in the property one.   | operty? Check and another y property (see               | Do not deduct secured the amount of any secu Creditors Who Have Cla  Current value of the entire property?  Do not deduct secured the amount of any secu  | red claims on Schedule hims Secured by Propert Current value of the portion you own?  claims or exemptions. F   |
| 4.1               | mples: Boats, trailers, motors  No  Yes  Make  Model:  Year:  Approximate mileage:  Other information:  Make  Model:                        |                   | who has an interest in the proone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors a check if this is communit instructions)  Who has an interest in the proone.  | operty? Check and another y property (see               | Do not deduct secured the amount of any secu Creditors Who Have Clas  Current value of the entire property?  Do not deduct secured the amount of any secu   | red claims on Schedule hims Secured by Propert Current value of the portion you own?  claims or exemptions. For the claims on Schedule  |
| 4.1               | mples: Boats, trailers, motors  No  Yes  Make  Model:  Year:  Approximate mileage:  Other information:  Make  Model:  Year:                 |                   | who has an interest in the proone. Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors a communit instructions)  Who has an interest in the proone. Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 and Debtor 4 only Debtor 1 and Debtor 5 and Debtor 5 and Debtor 6 one. Debtor 1 only | operty? Check and another y property (see               | Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property?  Do not deduct secured the amount of any secu Creditors Who Have Classifications                     | red claims on Schedule hims Secured by Propert Current value of the portion you own?  claims or exemptions. Fired claims on Schedule hims Secured by Propert                        |
| 4.1               | mples: Boats, trailers, motors  No  Yes  Make Model: Year: Approximate mileage:  Other information:  Make Model: Year: Approximate mileage: |                   | who has an interest in the proone. Debtor 1 and Debtor 2 only At least one of the debtors a Check if this is communit instructions)  Who has an interest in the proone. Debtor 1 and Debtor 2 only Debtor 1 only instructions)   | operty? Check and another y property (see               | Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property?  Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the | red claims on Schedule hims Secured by Propert Current value of the portion you own?  claims or exemptions. For the claims on Schedule hims Secured by Propert Current value of the |
| 4.1               | mples: Boats, trailers, motors  No  Yes  Make Model: Year: Approximate mileage:  Other information:  Make Model: Year: Approximate mileage: |                   | who has an interest in the proone.  Check if this is community instructions)  Who has an interest in the proone.  Debtor 1 and Debtor 2 only  At least one of the debtors a Check if this is community instructions)  Who has an interest in the proone.  Debtor 1 only  Debtor 2 only  Debtor 1 only  Debtor 2 only  Debtor 1 only  Debtor 2 only                            | operty? Check and another y property (see operty? Check | Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property?  Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the | red claims on Schedule hims Secured by Propert Current value of the portion you own?  claims or exemptions. For the claims on Schedule hims Secured by Propert Current value of the |

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| De       | ebtor 1                 | Latasha                           | L.   | Conley                         | Case number (if known)             |   |
|----------|-------------------------|-----------------------------------|--|--------------------------------|------------------------------------|---|
|          |                         | First Name                        | Middle Name  | Last Name                      |                                    |   |
|          |                         |                                   | our Personal and Household e any legal or equitable intere                                     |                                | ng items?                          | Current value of the portion you own? Do not deduct secured claims or exemptions. |
|          |                         |                                   | and furnishings<br>liances, furniture, linens, china, kitch                                    | enware                         |                                    |   |
| <b>✓</b> | Yes. [                  | Describe                          | Used living room furniture/bedroom   | furniture                      |                                    | \$700.00  |
|          |                         | tronics<br>bles: Televisions      | s and radios; audio, video, stereo, a  | nd digital equipment; compu    | iters, printers, scanners; music   |   |
| <b>✓</b> | Yes. [                  | Describe                          | Cellular phone/Televisions(5)/laptop   | /                              |                                    | \$1000.00   |
|          |                         | •                                 | ue<br>and figurines; paintings, prints, or ot<br>in, or baseball card collections; othe        |                                | • •                                |   |
| <b>✓</b> | No<br>Yes. [            | Describe                          |  |                                |                                    |   |
|          |                         | les: Sports, ph                   | rts and hobbies<br>otographic, exercise, and other hob<br>s; carpentry tools; musical instrume |                                | I tables, golf clubs, skis; canoes |   |
| <b>✓</b> | No<br>Yes. [            | Describe                          |  |                                |                                    | ·   |
|          | <b>0. Fire</b><br>Examp |                                   | es, shotguns, ammunition, and rela   | ted equipment                  |                                    |   |
| <b>✓</b> | No                      |                                   |  |                                |                                    |   |
|          | Yes. [                  | Describe                          |  |                                |                                    |   |
|          | 1. Clos<br>Examp<br>No  |                                   | clothes, furs, leather coats, designer   | wear, shoes, accessories       |                                    |   |
| <u>√</u> |                         | Describe                          | Used Clothing  |                                |                                    | \$400.00  |
|          | ·                       | •                                 | ewelry, costume jewelry, engagemei<br>r  | nt rings, wedding rings, heirl | oom jewelry, watches, gems,        |   |
| ✓        | No<br>Yes. [            | Describe                          | Costume Jewelry  |                                |                                    | \$50.00   |
|          | Examp                   | n-farm animal<br>oles: Dogs, cats | s<br>s, birds, horses  |                                |                                    |   |
|          | No<br>Yes. [            | Describe                          |  |                                |                                    |   |
| 1        | 4. Any                  | other person                      | al and household items you did n   | not already list, including a  | ny health aids you did not list    |   |
| ✓        | No                      |                                   |  |                                |                                    |   |
| O        | Yes. [                  | Describe                          |  |                                |                                    |   |
|          |                         |                                   | lue of all of your entries from Par<br>number here   |                                |                                    | \$2150.00   |

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| Debto          | r 1 Latasha<br>First Name                 | L.<br>Middle Name   | Conley<br>Last Name       | Case number (if known)                    |   |
|----------------|---|---|---------------------------|---|---|
| Part 4:        |   |   | <u> </u>                  |   |   |
|                |   | y legal or equitable interest   | in any of the followin    | g?  | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 16. <b>C</b> a | amples: Money you ha                      | ve in your wallet, in your home, in   | ·                         | n hand when you file your petition  Cash: |   |
|                |   | avings, or other financial accounts<br>stitutions. If you have multiple acc |                           | ares in credit unions, brokerage houses,  |   |
| i              | <b>✓</b> Yes                              |   | Institution name:         |   |   |
|                |   | 17.1. Checking account:   | Woodforest Bank           |   | \$0.00  |
|                |   | 17.2. Checking account:   |                           |   |   |
|                |   | 17.3. Savings account:  |                           |   |   |
|                |   | 17.4. Savings account:  |                           |   |   |
|                |   | 17.5. Certificates of deposit:  |                           |   |   |
|                |   | 17.6. Other financial account:  |                           |   |   |
|                |   | 17.7. Other financial account:  |                           |   |   |
|                |   | 17.8. Other financial account:  |                           |   |   |
|                |   | 17.9. Other financial account:  |                           |   | ·   |
|                |   | or publicly traded stocks<br>investment accounts with broker                | age firms, money market a | ccounts                                   |   |
|                | Yes                                       | Institution or issuer name:   |                           |   |   |
|                |   |   |                           |   |   |
|                |   |   |                           |   |   |
|                | an LLC, partnership, a                    | •   | ted and unincorporated    | businesses, including an interest in      |   |
|                | Yes. Give specific information about them | Name of entity  |                           | % of ownership:                           |   |
|                |   |   |                           |   |   |

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| Debt | tor 1 Latasha                                    | L.   | Conley                      | Case number (if known)                     |          |
|------|--|--|-----------------------------|--|----------|
|      | First Name                                       | Middle Name  | Last Name                   |  |          |
| 20.  | Negotiable instruments                           | porate bonds and other negotial include personal checks, cashiers' nents are those you cannot transfe Issuer name: | checks, promissory not      | tes, and money orders.                     |          |
| 21.  | Retirement or pensio<br>Examples: Interests in I | RA, ERISA, Keogh, 401(k), 403(b)   | ), thrift savings accounts  | , or other pension or profit-sharing plans |          |
|      | Yes. List each                                   | Type of account:   | Institution name:           |  |          |
|      | account  | 401(k) or similar plan:  |                             |  |          |
|      | separately.                                      | Pension plan:  |                             |  |          |
|      |  | •  |                             |  |          |
|      |  | IRA:   | -                           |  |          |
|      |  | Retirement account:  | -                           |  |          |
|      |  | Keogh:   |                             |  |          |
|      |  | Additional account:  |                             |  |          |
|      |  | Additional account:  |                             |  |          |
| 22.  |  | I prepayments d deposits you have made so that with landlords, prepaid rent, public                                |                             |  |          |
|      | ✓ Yes  | Electric:  | Security Deposit w/ La      | ndlord                                     | \$650.00 |
|      |  | Gas:   | -                           |  |          |
|      |  | Heating oil:   |                             |  |          |
|      |  | Security deposit on rental unit:   |                             |  |          |
|      |  | Prepaid rent:  |                             |  |          |
|      |  | Telephone:   |                             |  |          |
|      |  | Water:   | <del>_</del>                |  |          |
|      |  | Rented furniture:  |                             |  |          |
|      |  | Other:   |                             |  |          |
| 23.  | Annuities (A contract f                          | or a periodic payment of money to  | you, either for life or for | a number of years)                         |          |
|      | ✓ No ☐ Yes                                       | Issuer name and description:   |                             |  |          |
|      |  |  |                             |  |          |
|      |  |  |                             |  |          |
|      |  |  |                             |  |          |

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| Debto | or 1 Latasha   |  | L.               | Conley  | Case number (if known)  |   |
|-------|--|--|------------------|---|---|---|
|       | First Name   |  | Middle Name      | Last Name   |   |   |
|       |  | an education IRA, in 5<br>530(b)(1), 529A(b), ar   |                  | a qualified ABLE program, or                                      | under a qualified state tuition program.  |   |
|       | ✓ No  Yes  | Institution name and   | description. Sep | parately file the records of any in                               | terests.11 U.S.C. § 521(c):   |   |
|       |  |  |                  |   |   |   |
|       |  | able or future interes   | sts in property  | (other than anything listed in                                    | line 1), and rights or powers   |   |
|       | ✓ No<br>Yes. Desc  |  |                  |   |   |   |
| 26.   |  |  |                  | and other intellectual proper<br>eds from royalties and licensing |   |   |
|       | ✓ No  Yes. Desc  | cribe  |                  |   |   |   |
| 27.   |  | nchises, and other g   |                  |   | uor licenses, professional licenses   |   |
|       | ✓ No  Yes. Desc  | oribe  |                  |   |   |   |
| Mone  | ey or prope  | rty owed to you?   |                  |   |   | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 28.   | Tax refunds o  | wed to you   |                  |   |   |   |
|       |  |  |                  |   |   |   |
|       | <b>✓</b> No  |  |                  |   |   | <b>*</b> 0.00   |
|       | Yes. Give  | specific information<br>It them, including whe   | nther            |   | Federal:  | \$0.00  |
| İ     | Yes. Give abou   | it them, including whe<br>already filed the returns  |                  |   | Federal: State:   | \$0.00<br>\$0.00  |
| 20    | Yes. Give s<br>abou<br>you a<br>and  | It them, including whe<br>already filed the returns<br>the tax years                                 |                  |   |   |   |
|       | Yes. Give about you and from the support of the sup | It them, including whe<br>already filed the returns<br>the tax years                                 | S                | upport, child support, maintena                                   | State:  | \$0.00<br>\$0.00  |
|       | Yes. Give: abou you: and:  Family suppor Examples: Past  | rt them, including whe<br>already filed the returns<br>the tax years<br>rt<br>t due or lump sum alir | mony, spousal s  | upport, child support, maintena                                   | State:  Local:  ance, divorce settlement, property settlemen                                | \$0.00<br>\$0.00<br>t   |
|       | Yes. Give: abou you: and:  Family suppor Examples: Past  | It them, including whe<br>already filed the returns<br>the tax years                                 | mony, spousal s  | upport, child support, maintena                                   | State:  Local:  ance, divorce settlement, property settlemen  Alimony:                      | \$0.00<br>\$0.00<br>t   |
|       | Yes. Give: abou you: and:  Family suppor Examples: Past  | rt them, including whe<br>already filed the returns<br>the tax years<br>rt<br>t due or lump sum alir | mony, spousal s  | upport, child support, maintena                                   | State:  Local:  ance, divorce settlement, property settlement  Alimony:  Maintenance:       | \$0.00<br>\$0.00<br>t<br>\$0.00<br>\$0.00   |
|       | Yes. Give: abou you: and:  Family suppor Examples: Past  | rt them, including whe<br>already filed the returns<br>the tax years<br>rt<br>t due or lump sum alir | mony, spousal s  | upport, child support, maintena                                   | State: Local:  ance, divorce settlement, property settlement Alimony: Maintenance: Support: | \$0.00<br>\$0.00<br>It<br>\$0.00<br>\$0.00<br>\$0.00                              |
|       | Yes. Give: abou you: and:  Family suppor Examples: Past  | rt them, including whe<br>already filed the returns<br>the tax years<br>rt<br>t due or lump sum alir | mony, spousal s  | upport, child support, maintena                                   | State: Local:  Alimony: Maintenance: Support: Divorce settlement:                           | \$0.00<br>\$0.00<br>tt<br>\$0.00<br>\$0.00<br>\$0.00                              |
| 30.   | Yes. Give about you and and a second for the second | It them, including whe already filed the returns the tax years                                       | mony, spousal si |   | State: Local:  ance, divorce settlement, property settlement Alimony: Maintenance: Support: | \$0.00<br>\$0.00<br>It<br>\$0.00<br>\$0.00<br>\$0.00                              |
| 30.   | Yes. Give about you and and a second for the second | It them, including whe already filed the returns the tax years                                       | mony, spousal si | nts, disability benefits, sick pay,                               | State: Local:  Alimony: Maintenance: Support: Divorce settlement: Property settlement:      | \$0.00<br>\$0.00<br>tt<br>\$0.00<br>\$0.00<br>\$0.00                              |
| 30.   | Yes. Give about your and   | them, including whe already filed the returns the tax years  | mony, spousal si | nts, disability benefits, sick pay,                               | State: Local:  Alimony: Maintenance: Support: Divorce settlement: Property settlement:      | \$0.00<br>\$0.00<br>tt<br>\$0.00<br>\$0.00<br>\$0.00                              |

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| Deb      | tor 1    | Latasha                                      | L.   | Conley   | Case number (if known)                       |  |
|----------|----------|--|--|--|--|--|
|          |          | First Name                                   | Middle Name  | Last Name  |  |  |
| 31.      |          | erests in insurance<br>amples: Health, disab |  | alth savings account (HSA); credit, l  | nomeowner's, or renter's insurance           |  |
|          |          | No<br>Yes. Name the insu                     | Irance company                                     | Company name:  | Beneficiary:                                 | Surrender or refund value:                     |
|          | <u> </u> | of each policy and                           |  | Term Life  |  | \$0.00   |
|          |          |  |  |  |  |  |
|          |          |  |  |  |  |  |
| 32.      | If y     |  | y of a living trust, expect                        | someone who has died<br>proceeds from a life insurance police  | cy, or are currently entitled to receive     |  |
|          | <b>✓</b> | No   |  |  |  |  |
|          |          | Yes. Describe                                |  |  |  |  |
|          |          |  |  |  |  |  |
| 33.      |          |  |  | you have filed a lawsuit or made<br>urance claims, or rights to sue  | a demand for payment                         |  |
|          | <b>✓</b> | -  |  |  |  |  |
|          |          | Yes. Describe                                |  |  |  |  |
|          |          |  |  |  |  |  |
| 34.      |          | her contingent and<br>set off claims         | l unliquidated claims of                           | every nature, including counter  | claims of the debtor and rights              |  |
|          | V        | No   |  |  |  |  |
|          | Ė        | Yes. Describe                                |  |  |  | ]  |
|          |          |  |  |  |  |  |
| 35.      | An       | y financial assets y                         | ou did not already list                            |  |  |  |
|          | <b>✓</b> | No   |  |  |  |  |
|          |          | Yes. Describe                                |  |  |  |  |
|          |          |  |  |  |  | <u></u>  |
| 36.      | Ad       | ld the dollar value o                        | of all of your entries from                        | m Part 4, including any entries fo   | or pages you have attached                   | Фого оо  |
|          |          |  | -  |  |  | \$650.00                                       |
|          |          |  |  |  |  |  |
| Dout     | r.       | Dogoribo Any P                               | usings Poleted Pro                                 | anorty Vou Own or Hoyo on I  | nterest In. List any real estate in Pa       | aut 4  |
| Part 37. |          |  |  | terest in any business-related p   |  | 211.1.   |
|          |          | No. Go to Part 6.                            | ,g e. oquitable III                                | and the second s | -F7.   | Current value of the                           |
|          | ¥        | Yes. Go to line 38.                          |  |  |  | portion you own?  Do not deduct secured claims |
|          |          | ,  |  |  |  | or exemptions                                  |
| 38.      | Ac       | counts receivable                            | or commissions you alr                             | eady earned  |  |  |
|          | <b>✓</b> | No Describe                                  |  |  |  | 7  |
|          | L        | Yes. Describe                                |  |  |  |  |
| 20       | 04       | fine equipment for                           | nighings and surelline                             |  |  |  |
| 39.      |          |  | nishings, and supplies<br>ated computers, software | e, modems, printers, copiers, fax m  | achines, rugs, telephones, desks, chairs, el | ectronic devices                               |
|          | <b>✓</b> | No   |  |  |  |  |
|          |          | Yes. Describe                                |  |  |  |  |
|          |          |  |  |  |  |  |

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| Deb      | tor 1 Latasha                  | L.  | Conley                          | Case number (if known)          |  |
|----------|--------------------------------|---|---------------------------------|---------------------------------|--|
| 1        | First Name                     | Middle Name   | Last Name                       |                                 |  |
| 40.      | Machinery, fixtures, e         | quipment, supplies you us                                   | e in business, and tools of you | ur trade                        |  |
|          | <b>✓</b> No                    |   |                                 |                                 |  |
|          | Yes. Describe                  |   |                                 |                                 |  |
|          |                                |   |                                 |                                 |  |
|          |                                |   |                                 |                                 |  |
| 41.      | Inventory                      |   |                                 |                                 |  |
|          | <b>✓</b> No                    |   |                                 |                                 |  |
|          | Yes. Describe                  |   |                                 |                                 |  |
|          | ш                              |   |                                 |                                 |  |
|          |                                |   |                                 |                                 |  |
| 42.      | Interests in partnersh         | ips or joint ventures                                       |                                 |                                 |  |
|          | ✓ No                           |   |                                 |                                 |  |
|          | Yes. Give specific             | Na  | ame of entity:                  | % of ownership:                 |  |
|          | information about              |   |                                 |                                 |  |
|          | them                           | _   |                                 |                                 |  |
|          |                                | _   |                                 |                                 |  |
|          |                                |   |                                 |                                 |  |
| 43.      | Customer lists, mailing        | lists, or other compilation                                 | ıs                              |                                 |  |
|          | - N                            | ,,  |                                 |                                 |  |
|          | No                             |   |                                 |                                 |  |
|          | Yes. Do your lists in          | nclude personally identifiable                              | information (as defined in 11 U | .S.C. § 101(41A))?              |  |
|          | ☐ No                           |   |                                 |                                 |  |
|          | Yes. Desc                      | rihe  |                                 |                                 |  |
|          |                                | 1100  |                                 |                                 |  |
| 44.      | Any business-related           | property you did not alread                                 | dy list                         | <u> </u>                        |  |
|          | - N                            |   |                                 |                                 |  |
|          | <b>✓</b> No                    |   |                                 |                                 | <u> </u>                                       |
|          | Yes. Give specific information |   |                                 |                                 |  |
|          | imomation                      | _   |                                 |                                 | <del></del>                                    |
|          |                                | _   |                                 |                                 | <u> </u>                                       |
|          |                                |   |                                 |                                 |  |
|          |                                |   |                                 |                                 |  |
|          |                                | _   |                                 |                                 |  |
|          |                                |   |                                 |                                 |  |
|          |                                |   |                                 |                                 |  |
| 45. A    | dd the dollar value of a       | all of your entries from Par                                | t 5, including any entries for  | pages you have attached         |  |
|          |                                |   |                                 |                                 |  |
| <u> </u> |                                | 10  | F                               | V . 6                           |  |
| Part     | 6: Describe Any Fa             | arm- and Commercial I<br>interest in farmland, list it in P | risning-Related Property        | You Own or Have an Interest In. |  |
|          |                                |   |                                 |                                 |  |
| 46.      | Do you own or have a           | ny legal or equitable inter                                 | est in any farm- or commerci    | al fishing-related property?    |  |
|          | No. Go to Part 7.              |   |                                 |                                 | Current value of the                           |
|          | Yes. Go to line 47.            |   |                                 |                                 | portion you own?  Do not deduct secured claims |
|          | _                              |   |                                 |                                 | or exemptions                                  |
| 47.      | Farm animals                   |   |                                 |                                 |  |
|          | Examples: Livestock, p         | oultry, farm-raised fish                                    |                                 |                                 |  |
|          | No                             |   |                                 |                                 |  |
|          | Yes. Describe                  |   |                                 |                                 |  |
|          |                                |   |                                 |                                 |  |
|          |                                |   |                                 |                                 |  |

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| Debto          | or 1 Latasha<br>First Name | L.<br>Middle Name                             | Conley<br>Last Name      | Case number (if known)         |              |
|----------------|----------------------------|---|--------------------------|--------------------------------|--------------|
| 48.            | Crops-either growing       |   |                          |                                |              |
|                | <b>✓</b> No                |   |                          |                                |              |
|                | Yes. Describe              |   |                          |                                |              |
|                |                            |   |                          |                                |              |
| 49.            | Farm and fishing equi      | pment, implements, machinery, fi              | xtures, and tools of tra | de                             |              |
|                | ✓ No  Yes. Describe        |   |                          |                                |              |
|                | Tes. Describe              |   |                          |                                |              |
| 50.            | Farm and fishing supp      | Dlies, chemicals, and feed                    |                          |                                |              |
|                | ✓ No                       | •   |                          |                                |              |
|                | Yes. Describe              |   |                          |                                |              |
|                |                            |   |                          |                                |              |
| 51.            | Any farm- and comme        | ercial fishing-related property you           | did not already list     |                                |              |
|                | No                         |   |                          |                                |              |
|                | Yes. Describe              |   |                          |                                |              |
|                |                            | <u> </u>                                      |                          |                                | <u> </u>     |
|                |                            | all of your entries from Part 6, incluer here |                          | ages you have attached         |              |
| <b>&gt;</b>    | it of write that hambe     |   |                          |                                |              |
|                |                            |   |                          |                                |              |
| Part 7         | Describe All Pro           | operty You Own or Have an In                  | terest in That You D     | oid Not List Above             |              |
|                | Do you have other pro      | perty of any kind you did not alrea           |                          |                                |              |
|                |                            | ts, country club membership                   |                          |                                |              |
|                | ✓ No  Yes. Give specific   |   |                          |                                |              |
|                | information                |   |                          |                                |              |
|                |                            |   |                          |                                |              |
| 54. Ad         | d the dollar value of a    | all of your entries from Part 7. Writ         | e that number here       |                                |              |
|                |                            |   |                          |                                |              |
|                |                            |   |                          |                                |              |
|                |                            |   |                          |                                |              |
| D. J.O         | List the Totals o          | f Each Dout of this Form                      |                          |                                |              |
| Part 8         | List the Totals of         | f Each Part of this Form                      |                          |                                |              |
| 55. <b>P</b>   | art 1: Total real estat    | e, line 2                                     |                          | <b></b>                        |              |
| 56. <b>p</b> a | art 2 total vehicles, li   | ne 5  | \$13625.00               |                                |              |
| 57. <b>P</b> a | art 3: Total personal a    | nd household items, line 15                   | \$2150.00                | <del></del> -                  |              |
| 58. <b>P</b> a | art 4: Total financial a   | ssets, line 36                                | \$650.00                 | <del></del> -                  |              |
| 59. <b>P</b>   | art 5: Total business-     | related property, line 45                     | φοσο.σσ                  | <del></del> -                  |              |
| 60. <b>P</b>   | art 6: Total farm- and     | fishing-related property, line 52             |                          | <del></del>                    |              |
| 61. <b>P</b>   | art 7: Total other prop    | perty not listed, line 54                     |                          | <u></u>                        |              |
| 62. <b>T</b>   | otal personal property     | . Add lines 56 through 61                     | \$16425.00               |                                | + \$16425.00 |
|                |                            |   | 470120.00                | Copy personal property total ▶ | . \$10125.50 |
|                |                            |   |                          |                                | \$16425.00   |
| 63. <b>To</b>  | otal of all property on    | Schedule A/B. Add line 55 + line 62           |                          |                                | 1            |

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| Fill in this information to identify your case: |                           |             |                      |  |  |
|---|---------------------------|-------------|----------------------|--|--|
| Debtor 1  | Latasha                   | L.          | Conley               |  |  |
|   | First Name                | Middle Name | Last Name            |  |  |
| Debtor 2  |                           |             |                      |  |  |
| (Spouse, if filing)                             | First Name                | Middle Name | Last Name            |  |  |
| United States E                                 | Bankruptcy Court for the: | Northern    | District of Illinois |  |  |
| Case number<br>(If known)                       |                           |             | (State)              |  |  |

### Official Form 106C

### Check if this is an amended filing

#### Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Pa | t 1: Identify the Property You Clair   | m as Exempt                          |   |                                    |  |  |  |  |
|----|--|--------------------------------------|---|------------------------------------|--|--|--|--|
| 1. | Which set of exemptions are you claim  | ing? Check one only, ev              | ven if your spouse is filing with you.  |                                    |  |  |  |  |
|    | ✓ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) |                                      |   |                                    |  |  |  |  |
|    | You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)                           |                                      |   |                                    |  |  |  |  |
| 2. | For any property you list on Schedule A  | N/B that you claim as e              | exempt, fill in the information below.  |                                    |  |  |  |  |
|    | Brief description of the property and line on Schedule A/B that lists this property  | Current value of the portion you own | Amount of the exemption you claim  Check only one box for each exemption.                           | Specific laws that allow exemption |  |  |  |  |
|    |  | Copy the value from<br>Schedule A/B  |   |                                    |  |  |  |  |
|    | Brief  |                                      |   | 735 ILCS 5/12-1001(a)              |  |  |  |  |
|    | description:   | \$400.00                             | \$400.00  |                                    |  |  |  |  |
|    | Used Clothing Line from  |                                      | 100% of fair market value, up to any  | _                                  |  |  |  |  |
|    | Schedule A/B:11  |                                      | applicable statutory limit  |                                    |  |  |  |  |
|    | Brief  | Ф <b>7</b> 00 00                     |   | 735 ILCS 5/12-1001(b)              |  |  |  |  |
|    | description:  Used living room   | \$700.00                             | \$700.00  |                                    |  |  |  |  |
|    | furniture/bedroom<br>furniture   |                                      | 100% of fair market value, up to any applicable statutory limit                                     | _                                  |  |  |  |  |
|    | Line from Schedule A/B: 06   |                                      |   |                                    |  |  |  |  |
| 3. | ✓ No   | ery 3 years after that for           | 375? cases filed on or after the date of adjustment.) rithin 1,215 days before you filed this case? |                                    |  |  |  |  |
|    | □ No □ Yes   |                                      |   |                                    |  |  |  |  |

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Conley Debtor 1 Latasha Case number (if known) Middle Name First Name Last Name Part 2: **Additional Page** Brief description of the property and **Current value of** Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you property Check only one box for each exemption. own Copy the value from Schedule A/B 735 ILCS 5/12-1001(b) Brief \$1,000.00 description: **✓** \$1,000.00 Cellular phone/Televisions(5)/laptop/ 100% of fair market value, up to any applicable statutory limit Line from Schedule A/B: 735 ILCS 5/12-1001(b) Brief \$0.00 description: **V** \$0 Checking account, 100% of fair market value, up to any Woodforest Bank applicable statutory limit Line from Schedule A/B: 17 735 ILCS 5/12-1001(b) Brief description: \$11,400.00 **✓** \$0 Dodge Charger, 2011 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 03 735 ILCS 5/12-1001(c); 735 ILCS Brief \$2,225.00 description: 5/12-1001(b) \$2,225.00; \$0.00 Pontiac Grand Prix, 100% of fair market value, up to any 2002 applicable statutory limit Line from 03 Schedule A/B: Brief 735 ILCS 5/12-1001(f) \$0.00 description: \$0 **Term Life** 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 735 ILCS 5/12-1001(b) Brief \$650.00 description: **✓** \$650.00 **Electric, Security** 100% of fair market value, up to any Deposit w/ Landlord applicable statutory limit Line from Schedule A/B: 735 ILCS 5/12-1001(b) Brief \$50.00 description: **V** \$50.00 **Costume Jewelry** 

Line from

Schedule A/B:

100% of fair market value, up to any

applicable statutory limit

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|                 |                        |   | Do                         | ocument Page 22 of (   | 58  |  |                                       |
|-----------------|------------------------|---|----------------------------|--|---|--|---------------------------------------|
| Fill in         | this infor             | mation to identify your ca              | se:                        |  |   |  |                                       |
| Debto           | or 1                   | Latasha<br>First Name                   | L.<br>Middle Name          | Conley<br>Last Name  |   |  |                                       |
| Debto<br>(Spous | or 2<br>se, if filing) | First Name                              | Middle Name                | Last Name  |   |  |                                       |
|                 |                        | ankruptcy Court for the:                | Northern                   | District of Illinois (State)   |   |  |                                       |
| (If knov        | number<br>vn)          |   |                            |  |   |  |                                       |
| Off             | icial                  | Form 106D                               |                            |  | •   |  | Check if this is an<br>Imended filing |
| Sc              | hadu                   | la D: Cradita                           | ore Who Ha                 | ve Claims Secure   | d by Prop   |  | J                                     |
|                 |                        |   |                            |  |   |  | 12/15                                 |
| more            | space is ı             | -                                       |                            | le are filing together, both are equinabler the entries, and attach it to t                              | •   |  |                                       |
|                 |                        | reditors have claims se                 | ocured by your proper      | tv?  |   |  |                                       |
|                 |                        |   |                            | with your other schedules. You hav   | re nothing else to repo   | ort on this form                                       |                                       |
|                 | <b>=</b>               | Fill in all of the information          |                            | with your other conceded. For her  | o nouning cloc to repo  | ort ort uno torri.                                     |                                       |
|                 |                        |   | i below.                   |  |   |  |                                       |
| Part            | 1: List                | All Secured Claims                      |                            |  |   |  |                                       |
| 2.              | separate               | ly for each claim. If more th           | nan one creditor has a pa  | cured claim, list the creditor ticular claim, list the other creditors order according to the creditor's | Column A  Amount of claim  Do not deduct the value of collateral. | Column B  Value of collateral that supports this claim | Column C Unsecured portion If any     |
| 2.1             |                        | ER Capital                              | Describe the property      | that secures the claim:  | \$11,670.00   | \$11,400.00  | \$270.00                              |
|                 | Creditor's<br>91 WAL   | Name<br>L STREET POB 666                | 2011 Dodge Charger         | ,  |   |  |                                       |
|                 | Numb                   |   |                            | e, the claim is: Check all that apply.   |   |  |                                       |
|                 |                        |   | Contingent                 |  |   |  |                                       |
|                 | MADISO                 |   | Unliquidated               |  |   |  |                                       |
|                 | City<br>Who ow         | State ZIP Code es the debt? Check one.  | Disputed                   |  |   |  |                                       |
|                 |                        | tor 1 only                              | Nature of lien. Check      | all that apply.  |   |  |                                       |
|                 |                        | tor 2 only<br>tor 1 and Debtor 2 only   | An agreement you car loan) | made (such as mortgage or secured  |   |  |                                       |
|                 |                        | east one of the debtors                 | Statutory lien (such       | n as tax lien, mechanic's lien)  |   |  |                                       |
|                 |                        | another                                 | Judgment lien from         | n a lawsuit  |   |  |                                       |
|                 |                        | ck if this claim relates community debt | Other (including a         | ight to offset)  |   |  |                                       |
|                 | Date de incurred       | bt was <u>11/2017</u>                   | Last 4 digits of accou     | nt number1000  |   |  |                                       |

Add the dollar value of your entries in Column A on this page. Write that number

\$11,670.00

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| Fill                           | in this infori  | mation to identify your c  | ase:  |  |   |  |   |  |
|--------------------------------|---|--|---|--|---|--|---|--|
| Deb                            | otor 1  | Latasha  | L.  | Conley   |   |  |   |  |
|                                |   | First Name   | Middle Name   | Last Name  |   |  |   |  |
|                                | otor 2  |  |   |  |   |  |   |  |
| (Spc                           | use, if filing)   | First Name   | Middle Name   | Last Name  |   |  |   |  |
| Uni                            | ted States B  | ankruptcy Court for the:   | Northern  | District of Illinois   |   |  |   |  |
|                                |   |  |   | (State)  |   |  |   |  |
|                                | se number<br>lown)  |  |   |  |   |  |   |  |
| Of                             | ficial F  | orm 106E/F   |   |  |   | Check  | if this is an                                 | amended filing                               |
|                                |   |  |   |  |   |  |   |  |
| Sc                             | chedu   | ıle E/F: Cre   | editors Who   | Have Unsec   | cured Claims  |  |   | 12/15  |
| othe<br>Forn<br>clair<br>the c | er party to a<br>n 106A/B) a<br>ns that are<br>entries in t<br>wn). | any executory contracts<br>and on <i>Schedule G: Exe</i><br>listed in <i>Schedule D: C</i><br>he boxes on the left. At | s or unexpired leases that<br>cutory Contracts and Une<br>creditors Who Hold Claims<br>tach the Continuation Pa | could result in a claim.<br>xpired Leases (Official F<br>Secured by Property. If           | s and Part 2 for creditors wit<br>Also list executory contracts<br>orm 106G). Do not include a<br>more space is needed, copy<br>op of any additional pages, w | on <i>Schedule</i><br>ny creditors<br>the Part you | e A/B: Propo<br>with partial<br>need, fill it | erty (Official<br>lly secured<br>out, number |
| Par                            | t 1: List   | All of Your PRIORIT  | Y Unsecured Claims  |  |   |  |   |  |
| 1.                             | Do any cr   | editors have priority un   | secured claims against y  | ou?  |   |  |   |  |
|                                | <b>✓</b> No. 0  | Go to Part 2.  |   |  |   |  |   |  |
|                                | Yes.  |  |   |  |   |  |   |  |
| 2.                             | listed, ider<br>As much a<br>Continuati                             | ntify what type of claim it<br>as possible, list the claims<br>ion Page of Part 1. If mor                              | is. If a claim has both priorit   | y and nonpriority amounts<br>ling to the creditor's name<br>particular claim, list the oth |   | ooth priority a                                    | nd nonpriori                                  | ity amounts.                                 |
|                                |   |  |   |  |   | Tatal  | Deignitus                                     | Mannuiauitu                                  |

claim

amount

amount

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| Debtor     | 1 Latasha<br>First Name   | L.<br>Middle Name            | Conley<br>Last Name    | Case number (if k  | known)   |                   |
|------------|---|------------------------------|------------------------|--|--|-------------------|
| Dowt O     | List All of Your NONPRIO  |                              |                        |  |  |                   |
|            | any creditors have nonpriority  No. You have nothing to repo  | unsecured claims ag          | ainst you?             | urt with your other schedules.   |  |                   |
| un<br>If i | st all of your nonpriority unsecu<br>secured claim, list the creditor sep<br>more than one creditor holds a pa<br>ge of Part 2.   | arately for each claim. F    | For each claim listed, | identify what type of claim it is  | s. Do not list claims already in   | cluded in Part 1. |
|            | BMW FIN SVC Nonpriority Creditor's Name PO BOX 3608 Number Street  DUBLIN Ohio City State Who incurred the debt? Check of Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only  | 43016<br>Zip Cod<br>one.     | Whe                    | 4 digits of account number n was the debt incurred?  f the date you file, the claim Contingent Unliquidated Disputed of NONPRIORITY unsecured Student loans Obligations arising out of a sep   | d claim:<br>paration agreement or  | Total claim       |
|            | At least one of the debtors an  Check if this claim relates Is the claim subject to offset?  No  Yes  |                              |                        | divorce that you did not report Debts to pension or profit-shar debts Other. Specify 36 Aut  | • •  |                   |
|            | CAVALRY PORTFOLIO SERV Nonpriority Creditor's Name 4050 E COTTON CENTER BLV Number Street  PHOENIX Arizon City State Who incurred the debt? Check of Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors an Check if this claim relates is the claim subject to offset?  Yes          | Zip Coo<br>one.<br>d another | de Whe                 | ORIGINAL   | d claim:<br>paration agreement or<br>as priority claims                            | \$421.00          |
|            | City of Chicago Parking Nonpriority Creditor's Name 121 N. LaSalle St # 107A Number Street  Chicago Illinois City State Who incurred the debt? Check of Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors an Check if this claim relates Is the claim subject to offset?  ✓ No  Yes | Zip Coo<br>one.<br>d another | de Whe                 | 4 digits of account number n was the debt incurred?  If the date you file, the claim Contingent Unliquidated Disputed  If the formula of the contingent of NONPRIORITY unsecured of NONPRIORITY unsecured of the continuous of the c | n/a  is: Check all that apply.  d claim:  paration agreement or as priority claims | <u>\$1,700.00</u> |

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Conley Debtor 1 Latasha Case number (if known) Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.4 ComEd \$1,500.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 3 Lincoln Center As of the date you file, the claim is: Check all that apply. Bankruptcy Section Contingent Unliquidated 60181 Oakbrook Terrace Illinois City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another Check if this claim relates to a community debt Other. Specify \_\_\_ Other Is the claim subject to offset? **✓** No Yes FIRST PREMIER BANK \$1,014.00 7810 Last 4 digits of account number \_\_\_ Nonpriority Creditor's Name Jefferson Capital Systems, LLC PO Box 7999 When was the debt incurred? 12/2014 Number Street As of the date you file, the claim is: Check all that apply. c/o Kelly Lukason Contingent 56302 Saint Cloud Minnesota Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify Is the claim subject to offset? **✓** No Yes FIRST PREMIER BANK 4.6 \$509.00 Last 4 digits of account number 2867 Nonpriority Creditor's Name Jefferson Capital Systems, LLC PO Box 7999 When was the debt incurred? 6/2013 As of the date you file, the claim is: Check all that apply. c/o Kelly Lukason Contingent 56302 Saint Cloud Minnesota Unliquidated City Zip Code Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify \_ CreditCard Is the claim subject to offset? **✓** No

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Conley Debtor 1 Latasha Case number (if known) Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.7 \$60.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 800849 When was the debt incurred? 9/2014 Number As of the date you file, the claim is: Check all that apply. Contingent Dallas Texas 75380 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_ CreditCard Is the claim subject to offset? **✓** No Yes Illinois Tollway \$1,000.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2700 Ogden Ave Number Street As of the date you file, the claim is: Check all that apply. Legal Dept Contingent Unliquidated Downers Grove 60515 Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other Other. Specify \_\_\_ Is the claim subject to offset? **✓** No Yes LVNV FUNDING LLC 4.9 \$2,017.00 Last 4 digits of account number 2226 Nonpriority Creditor's Name When was the debt incurred? 7/2016 P.O. Box 52815 As of the date you file, the claim is: Check all that apply. c/o Jeremy T. McCullough Aldridge Pite Haan, LLP Contingent 30355 Atlanta Georgia Unliquidated City State Zip Code Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts

✓ No ☐ Yes

Is the claim subject to offset?

Other. Specify \_\_\_\_

001 UnknownLoanType

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| Debtor  | 1 Latasha L.  | Conley Case number (if known)   |             |
|---------|---|---|-------------|
|         | First Name Middle Name                              | Last Name   |             |
| Part 2: | Your NONPRIORITY Unsecured Claims - Co              | ontinuation Page  |             |
|         |   | •   |             |
|         | After listing any entries on this page, number them | beginning with 4.5, followed by 4.6, and so forth.  | Total claim |
| 4.10    | LVNV FUNDING LLC                                    | Look 4 digito of account number 2602  | \$1,030.00  |
|         | Nonpriority Creditor's Name                         | Last 4 digits of account number 3693  |             |
|         | P.O. Box 52815                                      | When was the debt incurred? 6/2016  |             |
|         | Number Street                                       | As of the data you file the plain in Check all that apply   |             |
|         | c/o Jeremy T. McCullough Aldridge Pite Haan, LLP    | As of the date you file, the claim is: Check all that apply.  |             |
|         | Atlanta 00055                                       | Contingent  |             |
|         | Atlanta Georgia 30355 City State Zip Co             | Unliquidated  |             |
|         | •   | Disputed  |             |
|         | Who incurred the debt? Check one.  Debtor 1 only    | Disputed  |             |
|         | Z Soster i siniy                                    | Type of NONPRIORITY unsecured claim:  |             |
|         | Debtor 2 only                                       | Student loans   |             |
|         | Debtor 1 and Debtor 2 only                          | 片   |             |
|         | 브   | Obligations arising out of a separation agreement or divorce that you did not report as priority claims |             |
|         | At least one of the debtors and another             | _   |             |
|         | Check if this claim relates to a community debt     | Debts to pension or profit-sharing plans, and other similar debts                                       |             |
|         |   | Other. Specify 001 UnknownLoanType  |             |
|         | Is the claim subject to offset?                     | Other. Specify  |             |
|         | ✓ No  |   |             |
|         | Yes   |   |             |
|         |   |   |             |
| 4.11    | MERRICK BANK CORP                                   | Last 4 digits of account number 8383  | \$1,452.00  |
|         | Nonpriority Creditor's Name                         | When was the debt incurred? 4/2014  |             |
|         | PO BOX 9201<br>Number Street                        | when was the debt incurred: 4/2014  |             |
|         | Number Street                                       | As of the date you file, the claim is: Check all that apply.  |             |
|         |   | Contingent  |             |
|         | OLD BETHPAGE New York 11804                         |   |             |
|         | City State Zip Co                                   | de Unliquidated   |             |
|         | Who incurred the debt? Check one.                   | Disputed  |             |
|         | Debtor 1 only                                       | Type of NONPRIORITY unsecured claim:  |             |
|         | Debtor 2 only                                       | <u> </u>  |             |
|         | 느 '   | Student loans   |             |
|         | Debtor 1 and Debtor 2 only                          | Obligations arising out of a separation agreement or  |             |
|         | At least one of the debtors and another             | divorce that you did not report as priority claims  |             |
|         | 브   | Debts to pension or profit-sharing plans, and other similar   |             |
|         | Check if this claim relates to a community debt     | debts   |             |
|         | Is the claim subject to offset?                     | Other. Specify CreditCard   |             |
|         | <b>✓</b> No   | <b>—</b>  |             |
|         |   |   |             |
|         | Yes   |   |             |
| 4.12    | MIDLAND FUNDING                                     | Look 4 digito of account number 0101  | \$185.00    |
|         | Nonpriority Creditor's Name                         | Last 4 digits of account number 8121  |             |
|         | 2365 Northside Drive                                | When was the debt incurred? 3/2016  |             |
|         | Number Street                                       | As of the data you file the plain in Check all that apply   |             |
|         |   | As of the date you file, the claim is: Check all that apply.  |             |
|         | Can Diago Colifornia 00100                          | Contingent  |             |
|         | San Diego California 92108 City State Zip Co        | do Unliquidated   |             |
|         | Who incurred the debt? Check one.                   | Disputed  |             |
|         | Debtor 1 only                                       |   |             |
|         | <u> </u>  | Type of NONPRIORITY unsecured claim:  |             |
|         | Debtor 2 only                                       | Student loans   |             |
|         | Debtor 1 and Debtor 2 only                          | Obligations arising out of a congretion agreement or  |             |
|         | <u> </u>  | Obligations arising out of a separation agreement or divorce that you did not report as priority claims |             |
|         | At least one of the debtors and another             | Debts to pension or profit-sharing plans, and other similar   |             |
|         | Check if this claim relates to a community debt     |   |             |
|         | Is the claim subject to offset?                     | Other. Specify 001 UnknownLoanType  |             |
|         |   | <u> </u>  |             |
|         | ✓ No  |   |             |
|         | Yes   |   |             |

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Conley Debtor 1 Latasha Case number (if known) Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.13 MIDNIGHT VELVET \$324.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 10/2014 1112 7TH AVE Number As of the date you file, the claim is: Check all that apply. Contingent MONROE Wisconsin 53566 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_\_\_ CreditCard Is the claim subject to offset? Yes 4.14 Peoples Gas Light & Coke Co. \$600.00 Last 4 digits of account number Nonpriority Creditor's Name 200 E. Randolph St. When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60601 Chicago Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_\_ Other Is the claim subject to offset? **✓** No Yes PORTFOLIO RC 4.15 \$370.00 9437 Last 4 digits of account number Nonpriority Creditor's Name 120 Corporate Boulevard When was the debt incurred? 3/2017 Number As of the date you file, the claim is: Check all that apply. Contingent 23502 Norfolk Virginia Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 001 Collection; Collecting for Is the claim subject to offset? **✓** ORIGINAL CREDITOR: 08 **✓** No SYNCHRONY BANK; ACCOUNT INFORMATION DISPUTED BY Yes

Other. Specify

CONSUMER

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| btor 1 Latasha             | L.                      | Conley                             | Case number (if known)  |             |
|----------------------------|-------------------------|------------------------------------|---|-------------|
| First Name                 | Middle Name             | Last Name                          |   |             |
| rt 2: Your NONPRIORITY     | Y Unsecured Claims      | <ul> <li>Continuation P</li> </ul> | age   |             |
| After listing any entries  | on this page, number th | nem beginning with                 | 4.5, followed by 4.6, and so forth.   | Total claim |
| 6 TD BANK USA/TARGETCH     |                         | _                                  | Last 4 digits of account number 8894  | \$511.00    |
| Nonpriority Creditor's Nam | 1e                      |                                    | When was the debt incurred? 4/2015  |             |
| PO BOX 673  Number Street  |                         | <del>-</del>                       | when was the debt incurred: 4/2015  |             |
| Number Street              |                         |                                    | As of the date you file, the claim is: Check all that apply.  |             |
|                            |                         |                                    | Contingent  |             |
| MINNEAPOLIS                |                         | 5440                               | Unliquidated  |             |
| City                       |                         | o Code                             |   |             |
| Who incurred the debt?     | Check one.              |                                    | Disputed  |             |
| ✓ Debtor 1 only            |                         |                                    | Type of NONPRIORITY unsecured claim:  |             |
| Debtor 2 only              |                         |                                    | Student loans   |             |
| Debtor 1 and Debtor 2      | 2 only                  |                                    | 불   |             |
| ш                          | •                       |                                    | Obligations arising out of a separation agreement or divorce that you did not report as priority claims |             |
| At least one of the del    | otors and another       |                                    |   |             |
| Check if this claim r      | relates to a community  | debt                               | Debts to pension or profit-sharing plans, and other similar debts                                       |             |
| Is the claim subject to o  | offset?                 |                                    | Other. Specify CreditCard   |             |
| ✓ No                       |                         |                                    | _   |             |
| =                          |                         |                                    |   |             |
| Yes                        |                         |                                    |   |             |

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Debtor 1 Latasha L. Conley Case number (if known)

| First Nan                   | ne Middle Name Last Name   |     |  |                    |  |
|-----------------------------|--|-----|--|--------------------|--|
| Part 4: Add th              | ne Amounts for Each Type of Unsecured Claim  |     |  |                    |  |
|                             | mounts of certain types of unsecured claims. This information is<br>nounts for each type of unsecured claim. |     | tatistical reporting purposes only<br>Total claims | y. 28 U.S.C. §159. |  |
| Total claims from Part 1    | 6a. Domestic support obligations.  | 6a. | \$0.00   |                    |  |
| nom Fart i                  | 6b. Taxes and certain other debts you owe the government   | 6b. | \$0.00   |                    |  |
|                             | 6c. Claims for death or personal injury while you were intoxicated   | 6c. | \$0.00   |                    |  |
|                             | 6d. Other. Add all other priority unsecured claims. Write that amount here.                                  | 6d. | \$0.00   |                    |  |
|                             | 6e. Total. Add lines 6a through 6d.  | 6e. | \$0.00   |                    |  |
|                             |  |     | Total claims                                       |                    |  |
| Total claims<br>from Part 2 | 6f. Student loans  | 6f. | \$0.00   |                    |  |
|                             | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims  | 6g. | \$0.00   |                    |  |
|                             | 6h. Debts to pension or profit-sharing plans, and other similar debts  | 6h. | \$0.00   |                    |  |
|                             | 6i. Other. Add all other nonpriority unsecured claims. Write that amount here.                               | 6i. | \$24,616.00  |                    |  |
|                             | 6j. Total. Add lines 6f through 6i.  | 6i. | \$24,616.00  |                    |  |

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| Fill in this info         | rmation to identify your c | ase:        |                      |
|---------------------------|----------------------------|-------------|----------------------|
| Debtor 1                  | Latasha                    | L.          | Conley               |
|                           | First Name                 | Middle Name | Last Name            |
| Debtor 2                  |                            |             |                      |
| (Spouse, if filing)       | First Name                 | Middle Name | Last Name            |
| United States             | Bankruptcy Court for the:  | Northern    | District of Illinois |
|                           |                            |             | (State)              |
| Case number               |                            |             |                      |
| Case number<br>(If known) |                            |             | (3:111)              |

#### Official Form 106G

### Check if this is an amended filing

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| Person or compa         | ny with whom you have | the contract or lease | State what the contract or lease is for                 |
|-------------------------|-----------------------|-----------------------|---|
| Pangea Real Estate Name | )                     |                       | Residential Lease,<br>Debtor is Lessee,<br>1 year lease |
| 2231 E 71st St          |                       |                       | •   |
| Number                  | Street                |                       |   |
| Chicago                 | Illinois              | 60649                 |   |
| City                    | State                 | Zip Code              |   |

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|   |   | DC  | ocument 1 a                                     | igc 32 01 c                             | 70   |   |
|---|---|---|---|---|--|---|
| Fill in this info                           | ormation to identify your o   | case:   |   |   |  |   |
| Debtor 1                                    | Latasha   | L.  | Conley  |   |  |   |
| Debtor 2                                    | First Name  | Middle Name   | Last Name                                       |   |  |   |
| (Spouse, if filing)                         | First Name  | Middle Name   | Last Name                                       |   |  |   |
| United States                               | Bankruptcy Court for the:   | Northern  | District of Illinois                            |   |  |   |
| Case number                                 |   |   | (State)   |   |  |   |
| (VIII)                                      |   |   |   |   |  | Check if this is an amended filing      |
| Official                                    | Form 106H   |   |   |   |  |   |
| Schodu                                      | le H: Your Co   | Nobtors   |   |   |  | 12/15                                   |
| Schedu                                      | ie n. Your Co   | Jenioi 2  |   |   |  | 12/15                                   |
| 1. Do you h  No Yes  2. Within the daho, Lo | s<br>h <b>e last 8 years, have you</b><br>buisiana, Nevada, New Me<br>. Go to line 3. | ou are filing a joint case, do  lived in a community pro xico, Puerto Rico, Texas, W er spouse, or legal equiva | operty state or territo<br>ashington, and Wisco | o <b>ry?</b> ( <i>Communi</i><br>nsin.) | ity property states and territor.                            | <i>ies</i> include Arizona, California, |
|   | s. Dia your spouse, ioini<br>No   | er spouse, or legal equiva  | dent live with you at the                       | ic ui iic:                              |  |   |
|   | Yes. In which communi   | ty state or territory did yo  | u live?   | Fill in th                              | e name and current address                                   | of that person.                         |
|   | Name of your spouse,  | former spouse, or legal equ   | ivalent   |   |  |   |
|   | Number Street   |   |   |   |  |   |
|   | City  | State   | Zip   | Code                                    |  |   |
|   |   | -   | •   |   | se is filing with you. List th<br>I the creditor on Schedule | -                                       |

Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Column 1: Your codebtor

Official Form 106H Schedule H: Your Codebtors page 1

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|  |   | D00  | Cumcin                 | i age 33        | 01 00             |                                   |                                      |
|--|---|--|------------------------|-----------------|-------------------|-----------------------------------|--------------------------------------|
| Fill in this inform                      | ation to identify                         | your case:   |                        |                 |                   |                                   |                                      |
| Debtor 1 Lat                             | tasha                                     | L.   | Conley                 | I               |                   |                                   |                                      |
|  | st Name                                   | Middle Name  | Last N                 |                 | — Che             | eck if this is:                   |                                      |
| Debtor 2                                 | -t Name                                   | Mistalla Nassa   | l a at Ni              |                 |                   | An amended filing                 |                                      |
| (Spouse, if filing) First                | st Name                                   | Middle Name  | Last N                 | ame             |                   | · ·                               | nost potition chapter 1              |
| United States Ban<br>the:<br>Case number | kruptcy Court for                         | Northern   | District of Illi<br>(S | nois<br>tate)   |                   | expenses as of the foll           | post-petition chapter 1 powing date: |
| (If known)                               |   |  |                        |                 |                   | MM / DD / YYYY                    |                                      |
| Official Fo                              | rm 106I                                   |  |                        |                 |                   |                                   |                                      |
| Schedule                                 | l: Your In                                | come   |                        |                 |                   |                                   | 12/1                                 |
| spouse. If more s<br>number (if know     | space is needed                           |  |                        |                 |                   |                                   |                                      |
| Fill in your em                          | ployment                                  |  | Debtor 1               |                 |                   | Debtor 2                          |                                      |
| information.                             |   | Employment status  | <b>✓</b> Emplo         | ved             |                   | Employed                          |                                      |
| If you have mo<br>attach a separa        | re than one job,<br>te page with          |  |                        | nployed         |                   | Not Employed                      |                                      |
| information abo<br>employers.            |   | Occupation   | Supervisor             |                 |                   |                                   |                                      |
| Include part tim<br>self-employed        | ne, seasonal, or                          | Employer's name  | Aimbridge              | Hospitality LLC | ;                 |                                   |                                      |
|  |   | Employer's address   | 5851 Lega              | acy Cir Ste 400 |                   |                                   |                                      |
| or homemaker,                            | y include student if it applies.          |  | Number Str             | eet             |                   | Number Street                     |                                      |
|  |   |  | <br>Plano              | Texas           | 75024             |                                   |                                      |
|  |   |  | City                   | State           | Zip Code          | City                              | State Zip Code                       |
|  |   | How long employed there?   |                        |                 |                   |                                   | _                                    |
| Part 2: Give D                           | etails About N                            | Nonthly Income   |                        |                 |                   |                                   |                                      |
| Estimate month                           | ly income as of t                         | the date you file this form  | <b>n.</b> If vou have  | nothing to rep  | ort for any line. | write \$0 in the space. I         | nclude vour non-filing               |
| spouse unless yo                         | u are separated.                          |  |                        |                 | -                 | or that person on the lir         |                                      |
| If you or your nor                       | ı-filina spouse hav                       | E ITIOLE LI IALI OLIE ELLIDIOVEL.  |                        |                 | 1                 |                                   | ,                                    |
|  | n-filing spouse have<br>ch a separate she |  |                        | _               | D. b. c. c.d      | For Debtor 2 or                   |                                      |
|  |   |  |                        | For             | Debtor 1          | For Debtor 2 or non-filing spouse |                                      |
| more space, atta                         | ch a separate she                         |  |                        | <b>For</b> 2.   | \$2,782.61        |                                   | _                                    |
| 2. <b>List monthly</b> deductions.) be.  | ch a separate she                         | et to this form.  Ary, and commissions (befo, calculate what the monthly |                        |                 |                   |                                   |                                      |

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| Debtor               | 1Latasha L.   | Conley                | Case numb                 | oer (if                           |                          |
|----------------------|---|-----------------------|---------------------------|-----------------------------------|--------------------------|
|                      | First Name Middle Name  | Last Name             | For Debtor 1              | For Debtor 2 or non-filing spouse |                          |
| Сору                 | line 4 here   | <b>→</b> 4.           | \$2,782.61                |                                   |                          |
| 5. List a            | III payroll deductions:   |                       |                           |                                   |                          |
| 5a. <b>T</b>         | ax, Medicare, and Social Security deductions  | 5a.                   | \$521.60                  |                                   |                          |
| 5b. <b>N</b>         | Mandatory contributions for retirement plans  | 5b.                   | \$0.00                    |                                   |                          |
| 5c. <b>V</b>         | oluntary contributions for retirement plans   | 5c.                   | \$0.00                    |                                   |                          |
| 5d. <b>F</b>         | Required repayments of retirement fund loans  | 5d.                   | \$0.00                    |                                   |                          |
|                      | nsurance  | 5e.                   | \$0.00                    |                                   |                          |
|                      | omestic support obligations   | 5f.                   | \$0.00                    |                                   |                          |
|                      | Jnion dues  | 5g.                   | \$0.00                    |                                   |                          |
| Ū                    | Other deductions. Specify:  |                       |                           | +                                 |                          |
|                      | he payroll deductions. Add lines 5a + 5b + 5c + 5d + 5  |                       | \$521.60                  | +                                 |                          |
|                      | ılate total monthly take-home pay. Subtract line 6 from   | m line 4. 7.          | \$2,261.00                |                                   |                          |
| 8. List a            | ıll other income regularly received:  |                       |                           |                                   |                          |
|                      | let income from rental property and from operating a usiness, profession, or farm   | 1                     |                           |                                   |                          |
| g                    | ttach a statement for each property and business showin<br>ross receipts, ordinary and necessary business expenses<br>ne total monthly net income.  |                       | \$0.00                    |                                   |                          |
|                      | nterest and dividends   | 8b.                   | \$0.00                    |                                   |                          |
|                      | amily support payments that you, a non-filing spouse ependent regularly receive   | e, or a               |                           |                                   |                          |
|                      | nclude alimony, spousal support, child support, maintena<br>ivorce settlement, and property settlement.   | ance,<br>8c.          | \$0.00                    |                                   |                          |
| 8d. <b>L</b>         | Inemployment compensation   | 8d.                   | \$0.00                    |                                   |                          |
| 8e. <b>S</b>         | ocial Security  | 8e.                   | \$0.00                    |                                   |                          |
| In<br>ca<br>ur<br>ho | ther government assistance that you regularly receinclude cash assistance and the value (if known) of any notes as assistance that you receive, such as food stamps (beinder the Supplemental Nutrition Assistance Program) or ousing subsidies pecify: | n-                    | \$0.00                    |                                   |                          |
| 8a <b>P</b>          | Pension or retirement income  | 8g.                   | \$0.00                    |                                   |                          |
| Ū                    | Other monthly income. Specify: Prorated Tax Refund  | 8h.                   | <del></del>               | +                                 |                          |
|                      | all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f  |                       | \$666.00                  |                                   |                          |
|                      | ulate monthly income. Add line 7 + line 9.<br>the entries in line 10 for Debtor 1 and Debtor 2 or non-fili  | 10.<br>ng spouse      | \$2,927.00                | +                                 | = \$2,927.00             |
| Inclue<br>frienc     | e all other regular contributions to the expenses that<br>de contributions from an unmarried partner, members of<br>ds or relatives.<br>ot include any amounts already included in lines 2-10 or  | your household, yo    | our dependents, your roon | •                                 |                          |
| Speci                | ify:  |                       |                           |                                   | 11. + \$0.00             |
|                      | the amount in the last column of line 10 to the amo<br>that amount on the Summary of Schedules and Statistic  |                       |                           |                                   | 12. \$2,927.00  Combined |
|                      | you expect an increase or decrease within the year a No. Yes. Explain:  | fter you file this fo | orm?                      |                                   | monthly income           |
|                      |   |                       |                           |                                   |                          |

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| Fill in this infor         | mation to identif                     | A VOIIL CASE.  |   |                       |   |            |
|----------------------------|---------------------------------------|--|---|-----------------------|---|------------|
|                            |                                       |  |   |                       |   |            |
| Debtor 1                   | Latasha<br>First Name                 | L.<br>Middle Name  | Conley Last Name                                    |                       |   |            |
| Debtor 2                   | riiotriamo                            | Made Name  | Last Namo   | Check if this is:     |   |            |
| (Spouse, if filing)        | First Name                            | Middle Name  | Last Name   | An amended fili       | ng  |            |
| United States E            | Bankruptcy Court                      | for the: Northern E  | District of Illinois                                |                       | howing post-petition of the following date: | chapter 13 |
| Case number                |                                       |  | (State)   |                       | 3   |            |
| (If known)                 |                                       |  |   | MM / DD / YYY         | Y   |            |
| Official                   | Form 10                               | 6J   |   |                       |   |            |
|                            |                                       | Expenses   |   |                       |   | 12/15      |
|                            |                                       | as possible. If two married people ar  |   |                       |   |            |
|                            | more space is nower every quest       | eeded, attach another sheet to this ion.   | form. On the top of any additiona                   | l pages, write your r | name and case numb                          | er         |
| Part 1: Des                | cribe Your Ho                         | usehold  |   |                       |   |            |
| 1. Is this a joi           | nt case?                              |  |   |                       |   |            |
| ✓ No. Go                   | o to line 2                           |  |   |                       |   |            |
|                            | oes Debtor 2 live                     | e in a separate household?   |   |                       |   |            |
|                            | ¬ No                                  |  |   |                       |   |            |
| L                          | _                                     | must file Official Forms 106J-2, Expen   | ses for Senarate Household of Dehti                 | nr 2                  |   |            |
| 2. Do you hou              | e dependents?                         |  | oo to coparate riodeonoid of Book                   |                       |   |            |
|                            |                                       | No   |   |                       |   | _          |
| Do not list L<br>Debtor 2. | Debtor 1 and                          | Yes. Fill out this information for each dependent                                  | Dependent's relationship to<br>Debtor 1 or Debtor 2 | Dependent's<br>age    | Does dependent I with you?                  | live       |
|                            |                                       |  | Child   | 12 years              | No.   |            |
|                            |                                       |  |   |                       | Yes.  |            |
|                            |                                       |  | Child   | 15 years              | No.   |            |
|                            |                                       |  |   |                       | ✓ Yes.                                      |            |
|                            |                                       |  | Child   | 15 years              | No.   |            |
|                            |                                       |  |   |                       | Yes.  |            |
|                            |                                       |  | Child   | 19 years              | No.   |            |
| 0.00                       |                                       |  |   |                       | Yes.  |            |
|                            | oenses include<br>f people other      | <b>✓</b> No  |   |                       |   |            |
| than<br>yourself an        | d vour                                | Yes  |   |                       |   |            |
| dependent                  |                                       |  |   |                       |   |            |
| Part 2: Esti               | mate Your On                          | going Monthly Expenses   |   |                       |   |            |
|                            |                                       | your bankruptcy filing date unless y<br>se bankruptcy is filed. If this is a sup   |   |                       |   |            |
| applicable da              |                                       | e bankruptcy is med. If this is a sup  | piementai ochedule 0, check the                     | box at the top of the | e ionii and iii iii the                     |            |
|                            |                                       | h non-cash government assistance i<br>luded it on Sc <i>hedule I: Your Incom</i> e |   |                       | Your ex                                     | kpenses    |
|                            | I or home owner<br>or the ground or k | ship expenses for your residence. In ot. 4.  | clude first mortgage payments and                   |                       | 4.  | \$1,120.00 |
|                            | luded in line 4:                      |  |   |                       | ••  |            |
|                            | state taxes                           |  |   |                       | 4a  | \$0.00     |
| 4b. Prope                  | rty, homeowner's                      | , or renter's insurance  |   |                       | 4b.   | \$0.00     |
| 4c Home                    | maintenance, rep                      | pair, and upkeep expenses  |   |                       | 40  | \$0.00     |

4d.

\$0.00

4d. Homeowner's association or condominium dues

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Debtor 1 Latasha L. Conley Case number (if known)
First Name Middle Name Last Name

| First Name   | Milde Name Last Name  |            |                  |
|--|---|------------|------------------|
|  |   |            | Your expenses    |
| 5. Additional mortgage paymen                                      | nts for your residence, such as home equity loans                           | 5.         | \$0.00           |
| 6. Utilities:  |   |            |                  |
| 6a. Electricity, heat, natural ga                                  | 3   | 6a.        | \$200.00         |
| 6b. Water, sewer, garbage col                                      | ection  | 6b.        | \$65.00          |
| 6c. Telephone, cell phone, Int                                     | ernet, satellite, and cable services  | 6c.        | \$100.00         |
| 6d. Other. Specify:  |   | 6d         | \$0.00           |
| 7. Food and housekeeping sup                                       | plies   | 7.         | \$500.00         |
| 8. Childcare and children's edu                                    | acation costs   | 8.         | \$0.00           |
| 9. Clothing, laundry, and dry cl                                   | eaning  | 9.         | \$75.00          |
| 10. Personal care products and                                     | d services  | 10.        | \$75.00          |
| 11. Medical and dental expens                                      | es  | 11.        | \$20.00          |
| 12. <b>Transportation.</b> Include gas Do not include car payments |   | 12.        | \$102.00         |
| 13. Entertainment, clubs, recre                                    | eation, newspapers, magazines, and books                                    | 13.        | \$0.00           |
| 14. Charitable contributions ar                                    | nd religious donations  | 14.        | \$0.00           |
| 15. <b>Insurance.</b> Do not include insurance dedi                | ucted from your pay or included in lines 4 or 20.                           |            |                  |
| 15a. Life insurance  |   | 15a        | \$0.00           |
| 15b. Health insurance  |   | 15b        | \$0.00           |
| 15c. Vehicle insurance   |   | 15c        | \$175.00         |
| 15d. Other insurance. Specify                                      |   | 15d        | \$0.00           |
| 16. Taxes. Do not include taxes                                    | deducted from your pay or included in lines 4 or 20.                        |            |                  |
| Specify:   |   | 16         | \$0.00           |
| 17. Installment or lease payme                                     | nts:  | 10         |                  |
| 17a. Car payments for Vehicle                                      |   | 17a        | \$320.00         |
| 17b. Car payments for Vehicle                                      | 2   | 17b        | \$0.00           |
| 17c. Other. Specify:   |   | 17c        | \$0.00           |
|  |   | 17d        | \$0.00           |
|  | maintenance, and support that you did not report as deducted from           |            | \$0.00           |
|  | le I, Your Income (Official Form 106I).                                     | 18.        |                  |
| , , ,  | o support others who do not live with you.                                  |            |                  |
| Specify:   |   | 19.        | \$0.00           |
| 20a. Mortgages on other prop                                       | es not included in lines 4 or 5 of this form or on Schedule I: Your Income. | 202        | <b>\$0.00</b>    |
| 20b. Real estate taxes.  | <del></del>   | 20a<br>20b | \$0.00<br>\$0.00 |
| 20c. Property, homeowner's,  | or renter's insurance   |            |                  |
| 20d. Maintenance, repair, and                                      |   | 20c<br>20d | \$0.00<br>\$0.00 |
| 20e. Homeowner's associatio  |   |            |                  |
| 200. Homeowifer 3 associatio                                       | 1 of condominant duos   | 20e        | \$0.00           |

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| Debtor 1          |  | L.                         | Conley                    | Case number (if known) |     |            |
|-------------------|--|----------------------------|---------------------------|------------------------|-----|------------|
|                   | First Name   | Middle Name                | Last Name                 |                        |     |            |
| 21. <b>Othe</b>   | r. Specify:  |                            |                           |                        | 21  | \$0.00     |
| 22. <b>Calc</b>   | ulate your monthly expens  | ses.                       |                           |                        |     | \$2,752.00 |
| 22a. A            | Add lines 4 through 21.  |                            |                           |                        |     | \$0.00     |
| 22b. (            | Copy line 22 (monthly expe   | nses for Debtor 2), if any | from Official Form 106J-2 |                        |     | \$2,752.00 |
| 22c. A            | Add line 22a and 22b. The r  | esult is your monthly exp  | enses.                    |                        | 22. |            |
| 23. <b>Calc</b> u | late your monthly net inc  | ome.                       |                           |                        |     |            |
| 23a. (            | Copy line 12 (your combine   | d monthly income) from     | Schedule I.               |                        | 23a | \$2,927.00 |
| 23b. (            | Copy your monthly expense  | es from line 22 above.     |                           |                        | 23b | \$2,752.00 |
| 23c. 8            | Subtract your monthly exper  | nses from your monthly i   | ncome.                    |                        |     | \$175.00   |
|                   | The result is your monthly n   | net income.                |                           |                        | 23c |            |
| mort              | example, do you expect to fi<br>gage payment to increase o<br>No<br>Yes  Explain here: | . , . ,                    |                           |                        |     |            |
|                   |  |                            |                           |                        |     |            |

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| Fill in this information to identify your case: |                           |             |                      |  |  |  |
|---|---------------------------|-------------|----------------------|--|--|--|
| Debtor 1  | Latasha                   | L.          | Conley               |  |  |  |
|   | First Name                | Middle Name | Last Name            |  |  |  |
| Debtor 2  |                           |             |                      |  |  |  |
| (Spouse, if filing)                             | First Name                | Middle Name | Last Name            |  |  |  |
| United States E                                 | Bankruptcy Court for the: | Northern    | District of Illinois |  |  |  |
| Case number<br>(If known)                       |                           |             | (State)              |  |  |  |

### Official Form 106Dec

Check if this is an amended filing

### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Par | t 1: Sign Below  |   |
|-----|--|---|
|     | Did you pay or agree to pay someone who is NOT an attorney to    | help you fill out bankruptcy forms?   |
|     | ✓ No   |   |
|     | Yes. Name of person  | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
|     |  |   |
|     |  |   |
|     | Under penalty of perjury, I declare that I have read the summary | and schedules filed with this declaration and   |
|     | that they are true and correct.                                  |   |
| ×   | /s/ Latasha Conley   | *   |
|     | Signature of Debtor 1  | Signature of Debtor 2   |
|     | Date 12/16/2017  | Date  |
|     | MM/DD/YYYY   | MM/DD/YYYY  |

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| there  |                                 |
|--|---------------------------------|
| United States Bankruptcy Court for the:    Northern  | amended filing 04/10 ng correct |
| Official Form 107  Statement of Financial Affairs for Individuals Filing for Bankruptcy  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplyin information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your naturabler (if known). Answer every question.  Part 1: Give Details About Your Marital Status and Where You Lived Before  1. What is your current marital status?    Married   Not married   No   Yes. List all of the places you lived anywhere other than where you live now?   Debtor 1: Dates Debtor 1 lived there   Debtor 2:   | amended filing 04/10 ng correct |
| Case number (If Known)  Official Form 107  Statement of Financial Affairs for Individuals Filing for Bankruptcy  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplyir information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your natural (if known). Answer every question.  Part 1: Give Details About Your Marital Status and Where You Lived Before  1. What is your current marital status?  Married  Not married  2. During the last 3 years, have you lived anywhere other than where you live now?  No  Yes. List all of the places you lived in the last 3 years. Do not include where you live now.  Debtor 1:  Dates Debtor 1 lived there  Same as Debtor 1  Same as Debtor 1  Number Street  From  Number Street  From  Number Street  From  Number Street  From  To   | amended filing 04/10 ng correct |
| Official Form 107  Statement of Financial Affairs for Individuals Filing for Bankruptcy  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your nanumber (if known). Answer every question.  Part 1: Give Details About Your Marital Status and Where You Lived Before  1. What is your current marital status?  Married  Not married  2. During the last 3 years, have you lived anywhere other than where you live now?  Pets. List all of the places you lived in the last 3 years. Do not include where you live now.  Debtor 1: Dates Debtor 1 lived there  Dates Debtor 2: Date there  Same as Debtor 1  Number Street  From  Number Street  | amended filing 04/10 ng correct |
| Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplyir information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your nanumber (if known). Answer every question.  Part 1: Give Details About Your Marital Status and Where You Lived Before  1. What is your current marital status?    Married   Not married   Not married   No mode   Not married   Details About Your Marital Status and Where you live now?   No   See List all of the places you lived in the last 3 years. Do not include where you live now.    Debtor 1:   Dates Debtor 1 lived there   Debtor 2:   Date there   Same as Debtor 1   Same as Debtor 2   Same as Debtor 3   Same as Debtor 3   Same as Debtor 4   Same as Debtor  | 04/10                           |
| Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplyin information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your nanumber (if known). Answer every question.  Part 1: Give Details About Your Marital Status and Where You Lived Before  1. What is your current marital status?  Married  Not married  2. During the last 3 years, have you lived anywhere other than where you live now?  Part 1: Dates Debtor 1 lived there  Debtor 1: Dates Debtor 1 lived there  Number Street From  Number Street Fr | ng correct                      |
| information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your nanumber (if known). Answer every question.  Part 1: Give Details About Your Marital Status and Where You Lived Before  1. What is your current marital status?    Married   Not married   No married   No   Yes. List all of the places you lived anywhere other than where you live now?   Yes. List all of the places you lived in the last 3 years. Do not include where you live now.    Debtor 1:   Dates Debtor 1 lived there   Debtor 2:   Date there   Same as Debtor 1   Same as Debtor 2   Same as Debtor 3   Same as Debt |                                 |
| 1. What is your current marital status?  Married Not married  During the last 3 years, have you lived anywhere other than where you live now?  No Yes. List all of the places you lived in the last 3 years. Do not include where you live now.  Debtor 1: Dates Debtor 1 lived there Same as Debtor 1  Number Street From To Number Street From To  |                                 |
|  |                                 |
| 2. During the last 3 years, have you lived anywhere other than where you live now?   No  Yes. List all of the places you lived in the last 3 years. Do not include where you live now.   Debtor 1:  Dates Debtor 1 lived there  Same as Debtor 1  Number Street  From  To  Number Street  From  To   |                                 |
| 2. During the last 3 years, have you lived anywhere other than where you live now?  No Yes. List all of the places you lived in the last 3 years. Do not include where you live now.  Debtor 1: Dates Debtor 1 lived there  Debtor 2: Same as Debtor 1  Number Street  From To  Number Street  From To   |                                 |
| No Yes. List all of the places you lived in the last 3 years. Do not include where you live now.  Debtor 1: Dates Debtor 1 lived there  Debtor 2: Same as Debtor 1  Same as Debtor 1  From To  Number Street  From To  |                                 |
| Yes. List all of the places you lived in the last 3 years. Do not include where you live now.  Debtor 1:  Dates Debtor 1 lived there  Same as Debtor 1  Number Street  To  Number Street  To   |                                 |
| Number Street To  Same as Debtor 1  Same as Debtor 1  From Number Street To To   |                                 |
| Number Street From Number Street From To   | es Debtor 2 lived<br>e          |
| To To To   | Same as Debtor 1                |
|  |                                 |
| City State Zip Code City State Zip Code  |                                 |
|  |                                 |
| Same as Debtor 1   | Same as Debtor 1                |
| Number Street From Number Street From  | 1                               |
| To To  | <del></del>                     |
| City State Zip Code City State Zip Code  |                                 |
| 3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)  No  |                                 |

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| Debte         | or 1                  | Latasha L.   | Conley   |  | number (if known)                                      |  |
|---------------|-----------------------|--|--|--|--|--|
|               |                       | First Name Middle  | e Name Last Na   | ıme  |  |  |
| Part :        | 2:                    | Explain the Sources of Your Inc  | come   |  |  |  |
| ı             | Fill i                | you have any income from employm<br>n the total amount of income you receivities. If you are filing a joint case and you<br>No<br>Yes. Fill in the details.  | ved from all jobs and all bus  | inesses, including part-time   |  | irs?   |
|               |                       |  | Debtor 1   |  | Debtor 2   |  |
|               |                       |  | Sources of income<br>Check all that apply.   | Gross income<br>(before deductions and<br>exclusions)                                      | Sources of income<br>Check all that apply.             | Gross income<br>(before deductions and<br>exclusions)            |
|               |                       | om January 1 of current year until<br>e date you filed for bankruptcy:   | Wages, commissions, bonuses, tips Operating a business                                       | \$19568.00   | Wages, commissions, bonuses, tips Operating a business |  |
|               |                       | or last calendar year: anuary 1 to December 31, 2016 ) YYYY  | Wages, commissions, bonuses, tips Operating a business                                       | \$18000.00   | Wages, commissions, bonuses, tips Operating a business |  |
|               |                       | or the calendar year before that:<br>anuary 1 to December 31, 2015 )<br>YYYY   | ✓ Wages, commissions, bonuses, tips  Operating a business                                    | \$18000.00   | Wages, commissions, bonuses, tips Operating a business |  |
| lı<br>p<br>fi | nclu<br>lubli<br>ling | you receive any other income during de income regardless of whether that in ic benefit payments; pensions; rental in a joint case and you have income that each source and the gross income from No  Yes. Fill in the details. | ncome is taxable. Examples<br>come; interest; dividends; m<br>you received together, list it | of other income are alimony;<br>noney collected from lawsuits<br>only once under Debtor 1. | s; royalties; and gambling and lot                     |  |
|               |                       |  | Debtor 1   |  | Debtor 2   |  |
|               |                       |  | Sources of income<br>Describe below.   | Gross income from each source (before deductions and exclusions)                           | Sources of income<br>Describe below.                   | Gross income from each source (before deductions and exclusions) |
|               |                       | rom January 1 of current year until<br>ne date you filed for bankruptcy:   | YTD LINK   | \$1,320.00   |  |  |
|               |                       | or last calendar year:<br>lanuary 1 to December 31, 2016 )<br>YYYY   | EST LINK   | \$1,584.00   |  |  |
|               |                       | or the calendar year before that:<br>lanuary 1 to December 31, 2015 )<br>YYYY  | EST LINK   | \$1,584.00   |  |  |
|               |                       |  |  |  |  |  |

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Conley Debtor 1 Latasha \_\_ Case number (if known) Middle Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors

Other

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| Debtor 1                      | Latasha                                 |   | L.  | Conl                                   | ley   | Case number (i                               | fknown)   |
|-------------------------------|---|---|---|--|---|--|---|
|                               | First Name                              |   | Middle Name   | Last I                                 | Name  |  |   |
| Insid<br>corp<br>ager<br>such | ders include your<br>porations of which | relatives; an<br>h you are an<br>for a busine | y general partners<br>officer, director, p<br>ss you operate as | relatives of any geerson in control, o | eneral partners; part<br>or owner of 20% or | nerships of which yo<br>more of their voting | tho was an insider?  ou are a general partner; securities; and any managing domestic support obligations, |
| 뇓                             |   |   |   |  |   |  |   |
| Ц                             | Yes. List all pay                       | ments to ar                                   | i insider.  | Dates of payment                       | Total amount paid                           | Amount you still owe                         | Reason for this payment   |
|                               | Insider's Name                          |   |   |  |   |  |   |
|                               | Number Street                           |   |   |  |   |  |   |
| _                             | City                                    | State   | Zip Code  |  |   |  |   |
|                               | Insider's Name                          |   |   |  |   |  |   |
|                               | Number Street                           |   |   |  |   |  |   |
|                               |   |   |   |  |   |  |   |
| _                             | City                                    | State   | Zip Code  |  |   |  |   |
| insid<br>Inclu                | der?<br>ude payments on<br>No           | debts guara                                   | or bankruptcy, d<br>anteed or cosigned<br>benefited an insi     | d by an insider.                       | payments or trans  Total amount             | Amount you                                   | account of a debt that benefited an  Reason for this payment  |
|                               |   |   |   | payment                                | paid  | still owe                                    | Include creditor's name   |
|                               | Insider's Name                          |   |   |  |   |  |   |
|                               |   |   |   |  |   |  |   |
| _                             | City                                    | State   | Zip Code  |  |   |  |   |
|                               | Insider's Name                          |   |   |  |   |  |   |
|                               | Number Street                           |   |   |  |   |  |   |
|                               | City                                    | State   | Zip Code  |  |   |  |   |

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Conley Debtor 1 Latasha Case number (if known) Middle Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No ◪ Yes. Fill in the details. Status of the case Nature of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Value of the Describe the property Date property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied.

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| Debt | tor 1 Latasha   | L.                       | Conley                        | Case number (if known)                        |                        |
|------|---|--------------------------|-------------------------------|---|------------------------|
|      | First Name  | Middle Name              | Last Name                     |   |                        |
| 11.  | Within 90 days before you accounts or refuse to make      |                          |                               | eank or financial institution, set off any am | ounts from your        |
|      | ✓ No  Yes. Fill in the details.                           |                          |                               |   |                        |
|      |   |                          | Describe the action th        | e creditor took Date action was taken         | Amount                 |
|      | Creditor's Name   |                          | -                             |   | -                      |
|      | Number Street   |                          |                               |   |                        |
|      |   |                          | _ Last 4 digits of account    | number: XXXX-                                 |                        |
|      | City State  | e Zip Code               | -                             |   |                        |
| 12.  | Within 1 year before you file appointed receiver, a custo |                          |                               | possession of an assignee for the benefit o   | of creditors, a court- |
|      | ✓ No ☐ Yes  |                          |                               |   |                        |
| Part | : 5: List Certain Gifts and                               | d Contributions          |                               |   |                        |
| 13.  | Within 2 years before you                                 | filed for bankruptcy, di | d you give any gifts with a t | otal value of more than \$600 per person?     |                        |
|      | ✓ No ✓ Yes. Fill in the details f                         | for each gift.           |                               |   |                        |
|      | Gifts with a total value per person                       | _                        | Describe the gifts            | Dates you<br>gave the<br>gifts                | Value                  |
|      |   |                          |                               |   |                        |
|      | Person to Whom You G                                      | ave the Gift             | <del>-</del><br>-             |   |                        |
|      | Number Street   |                          | -                             |   |                        |
|      | City State  | ·                        | -                             |   |                        |
|      | Person's relationship to                                  | you                      |                               |   |                        |
|      | Person to Whom You G                                      | ave the Gift             | <u>-</u>                      |   |                        |
|      | Number Street   |                          | -                             |   |                        |
|      | City State  | e Zip Code               | -                             |   |                        |
|      | Person's relationship to                                  | you                      |                               |   |                        |

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| 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$500 to any charity?    14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions to charities that total more than \$500   | Debtor 1 |                        | L.                           | Conley   | Case number (if kno                     | wn)                |   |
|--|----------|------------------------|------------------------------|--|---|--------------------|---|
| Ves. Fill in the details for each gift or contribution.   Gifts or contributions to charities that total more than \$600   Date you contributed   Charity's Name   |          | First Name             | Middle Name                  | Last Name  |   |                    |   |
| Ves. Fill in the details for each gift or contribution.   Gifts or contributions to charities that total more than \$600   Date you contributed   Charity's Name   | 14. Wi   | thin 2 years before yo | u filed for bankruptcy, die  | d you give any gifts or contrib                  | outions with a total value              | of more than \$600 | to any charity?                               |
| Yes, Fill in the details for each gift or contribution.   Gifts or contributions to charities that total more than \$600   | _        |                        |                              | , , , , ,  |   |                    |   |
| Charity's Name    Charity's Name   Charities   Describe what you contributed   Date you contributed   Charity's Name   Charit | ¥        | ı                      | e for each gift or contribut | tion   |   |                    |   |
| Charity's Name  Number Street  City State Zip Code  Number Street  City State Zip Code  Number Street  City State Zip Code  Describe any insurance coverage for the lose because of theft, fire, other disaster, or gambling?  No  Yes. Fill in the details.  Describe the property you lost and how the loss occurred how the loss occurred be any insurance coverage for the lose becide the amount that insurance has paid. List pending insurance claims on line 33 of Schedule  AE: Property.  List Certain Payments or Transfers  16. Within 1 year before you filed for bankruptory, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptory porpagning a bankruptory petition?  Include any stormeys, bankruptory petition preparers, or credit counseling agencies for services required in your bankruptory.  No  Yes. Fill in the details.  Description and value of any property transferred vas made  Semnal Law Firm Parson Who Was Paid 20 S. Clark Stoet Number Street  28th Floor Chicago lineois 69803 City State Zip Code  Email or website address  Person Who Made the Payment, if Not You  Purson Who Was Paid  Number Street  City State Zip Code  Email or website address   | L        | •                      |                              |  |   |                    |   |
| Charity's Name    Number Street  |          |                        |                              | Describe what you con                            | tributed                                |                    | Value   |
| Number Street  City State Zip Code    City State Zip Code  |          | that total more than   | π φοσο                       |  |   | Contributed        |   |
| Number Street  City State Zip Code    City State Zip Code  |          | Charitula Nama         |                              | _  |   |                    |   |
| Describe the property you lost and how the loss occurred   Describe any insurance coverage for the loss includes the anount that insurance has paid. List problem in the details.    Describe the property you lost and how the loss occurred   Describe any insurance coverage for the loss includes the anount that insurance has paid. List problem in the street or property you lost and how the loss occurred   Describe any insurance coverage for the loss includes the anount that insurance has paid. List problem in the street of the loss includes the anount that insurance has paid. List problem in the street of the street of the loss includes the anount that insurance has paid. List problem in the street of the street of the loss includes the property in the street of the loss includes any insurance coverage for the loss includes the street of the street of the loss includes any insurance coverage for the loss includes the loss includes any insurance coverage for the loss includes the loss includes any insurance coverage for the loss includes the loss includes any insurance coverage for the loss includes the loss includes any insurance coverage for the loss includes any insurance coverage for the loss includes the loss includes any insurance coverage for the loss includes any insurance coverage for the loss includes the loss includes any insurance coverage for the loss includes the loss includes any insurance coverage for the loss includes any insurance coverage for the loss includes the loss includes any insurance coverage for the loss includes any insurance coverage for the loss includes any insurance coverage for the loss includes the loss includes any insurance coverage for the loss includes any insurance coverage for the loss includes the loss incl   |          | Chanty's Name          |                              |  |   |                    |   |
| Describe the property you lost and how the loss occurred   Describe any insurance coverage for the loss includes the anount that insurance has paid. List problem in the details.    Describe the property you lost and how the loss occurred   Describe any insurance coverage for the loss includes the anount that insurance has paid. List problem in the street or property you lost and how the loss occurred   Describe any insurance coverage for the loss includes the anount that insurance has paid. List problem in the street of the loss includes the anount that insurance has paid. List problem in the street of the street of the loss includes the anount that insurance has paid. List problem in the street of the street of the loss includes the property in the street of the loss includes any insurance coverage for the loss includes the street of the street of the loss includes any insurance coverage for the loss includes the loss includes any insurance coverage for the loss includes the loss includes any insurance coverage for the loss includes the loss includes any insurance coverage for the loss includes the loss includes any insurance coverage for the loss includes any insurance coverage for the loss includes the loss includes any insurance coverage for the loss includes any insurance coverage for the loss includes the loss includes any insurance coverage for the loss includes the loss includes any insurance coverage for the loss includes any insurance coverage for the loss includes the loss includes any insurance coverage for the loss includes any insurance coverage for the loss includes any insurance coverage for the loss includes the loss includes any insurance coverage for the loss includes any insurance coverage for the loss includes the loss incl   |          |                        |                              | _  |   |                    |   |
| Describe any insurance coverage for the loss anything because of theft, fire, other disaster, or gambling?   No  |          | Number Street          |                              | _  |   |                    |   |
| Describe any insurance coverage for the loss anything because of theft, fire, other disaster, or gambling?   No  |          | -                      |                              | _  |   |                    |   |
| 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?  No Yes. Fill in the details.  Describe any insurance coverage for the loss include the amount that insurance lash surance lash sur |          | City S                 | tate Zip Code                |  |   |                    |   |
| 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?  No Yes. Fill in the details.  Describe any insurance coverage for the loss include the amount that insurance lash surance lash sur | Part 6:  | List Certain Losse     | es                           |  |   |                    |   |
| Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule AB: Property.    Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule AB: Property.    Itist Certain Payments or Transfers  | gaı      | mbling?<br>No          |                              | ,  | , , ,                                   | ,                  |   |
| Seminal Law Film   Person Who Was Paid   20 S. Clark Street   Number Street   28th Floor   Chicago   Illinois   60603   City   State   Zip Code   Email or website address   Person Who Was Paid   Number Street   City   State   Zip Code   Email or website address    |          | •                      |                              | Include the amount that pending insurance claims | insurance has paid. List                | -                  |   |
| 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.  No Yes. Fill in the details.    Description and value of any property   |          |                        |                              | AVB. FTOPERTY.                                   |   |                    |   |
| 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.  No Yes. Fill in the details.    Description and value of any property   |          |                        |                              |  |   |                    |   |
| 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.  No Yes. Fill in the details.    Description and value of any property   | Part 7:  | List Certain Paym      | ents or Transfers            |  |   |                    |   |
| Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address  Person Who Made the Payment, if Not You  Person Who Was Paid  Number Street  City State Zip Code Email or website address   |          | No                     |                              |  | , |                    |   |
| Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address Person Who Made the Payment, if Not You  Person Who Was Paid Number Street  City State Zip Code Email or website address   |          |                        |                              |  | f any property                          | or transfer        |   |
| Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address Person Who Made the Payment, if Not You  Person Who Was Paid Number Street  City State Zip Code Email or website address   |          | Semrad Law Firm        |                              | Attorney's Fee - 300 00                          |   |                    | \$300.00                                      |
| Number Street  28th Floor  Chicago Illinois 60603 City State Zip Code  Email or website address  Person Who Made the Payment, if Not You  Person Who Was Paid  Number Street  City State Zip Code  Email or website address  |          | Person Who Was Pai     | d                            |  |   |                    | <u>• • • • • • • • • • • • • • • • • • • </u> |
| 28th Floor Chicago Illinois 60603 City State Zip Code  Email or website address  Person Who Made the Payment, if Not You  Person Who Was Paid  Number Street  City State Zip Code  Email or website address  |          |                        |                              | _  |   |                    |   |
| Chicago Illinois 60603 City State Zip Code  Email or website address  Person Who Made the Payment, if Not You  Person Who Was Paid  Number Street  City State Zip Code  Email or website address   |          |                        |                              |  |   |                    |   |
| City State Zip Code  Email or website address  Person Who Made the Payment, if Not You  Person Who Was Paid  Number Street  City State Zip Code  Email or website address  |          | 28th Floor             |                              | _  |   |                    |   |
| Email or website address  Person Who Made the Payment, if Not You  Person Who Was Paid  Number Street  City State Zip Code  Email or website address   |          |                        |                              | _  |   |                    |   |
| Person Who Made the Payment, if Not You  Person Who Was Paid  Number Street  City State Zip Code  Email or website address   |          | City S                 | tate Zip Code                |  |   |                    |   |
| Person Who Was Paid  Number Street  City State Zip Code  Email or website address  |          | Email or website add   | ress                         | -  |   |                    |   |
| Number Street  City State Zip Code  Email or website address   |          | Person Who Made th     | e Payment, if Not You        | -  |   |                    |   |
| City State Zip Code  Email or website address  |          | Person Who Was Pai     | d                            | -  |   |                    |   |
| City State Zip Code  Email or website address  |          | Number Street          |                              | -  |   |                    |   |
| Email or website address   |          |                        |                              | _  |   |                    |   |
|  |          | City S                 | tate Zip Code                | -  |   |                    |   |
| Person Who Made the Payment, if Not You  |          | Email or website add   | ress                         | -  |   |                    |   |
|  |          | Person Who Made th     | e Payment, if Not You        | -  |   |                    |   |

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| Debto |                             | Latasha   | L.   |  | ase number (if known) |                                    |          |                              |
|-------|-----------------------------|---|--|--|-----------------------|------------------------------------|----------|------------------------------|
|       | -                           | First Name  | Middle Name  | Last Name                                    |                       |                                    |          |                              |
|       | help<br>Don                 | you deal with your credit<br>not include any payment or | tors or to make paym                               |  | nalf pay or transfer  | any property to a                  | anyone v | who promised to              |
|       | Ť                           | No<br>Yes. Fill in the details.                         |  |  |                       |                                    |          |                              |
| ·     |                             |   |  | Description and value of any pro transferred | perty                 | Date payment or transfer was made  | Amou     | nt of payment                |
|       |                             | Person Who Was Paid                                     |  |  |                       |                                    |          | _                            |
|       |                             | Number Street   |  |  |                       |                                    |          |                              |
|       |                             | City State  | Zip Code   |  |                       |                                    |          |                              |
| ,     | t <b>he</b><br>Inclu<br>and | ordinary course of your bu                              | usiness or financial af<br>and transfers made as s | ecurity (such as the granting of a securi    |                       |                                    |          |                              |
| !     |                             |   |  | Description and value of propert transferred |                       | y property or<br>ceived or debts p | oaid     | Date<br>transfer was<br>made |
|       |                             | Person Who Received Trans                               | nsfer  |  |                       |                                    |          |                              |
|       |                             | Number Street   |  |  |                       |                                    |          |                              |
|       |                             | City State<br>Person's relationship to yo               | Zip Code<br>u                                      |  |                       |                                    |          |                              |
|       |                             | Person Who Received Trans                               | nsfer  |  |                       |                                    |          |                              |
|       |                             | Number Street   |  |  |                       |                                    |          |                              |
|       |                             | City State<br>Person's relationship to yo               | Zip Code<br>u                                      |  |                       |                                    |          |                              |
|       | bene<br>(The                | eficiary?<br>se are often called asset-pro<br>No        |  | I you transfer any property to a self-s      | ettled trust or sim   | ilar device of whi                 | ich you  | are a                        |
|       |                             | Yes. Fill in the details.                               |  | Description and value of the pro             | perty transferred     |                                    |          | Date<br>transfer was<br>made |
|       |                             | Name of trust   |  |  |                       |                                    |          |                              |

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Conley

Debtor 1 Latasha \_ Case number (if known) List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance account was before number instrument closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code City Zip Code State 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Number Street Street Number City State Zip Code City State Zip Code

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Conley Debtor 1 Latasha \_\_ Case number (if known) Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code Zip Code City State Part 10: **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State Zip Code City State Zip Code 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State Zip Code City State Zip Code

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| Deb  | tor 1                   | Latasha               |                  | L.                 | Co             | onley           | Cas                | se number <i>(ii</i>                    | known)        |                |                                  |
|------|-------------------------|-----------------------|------------------|--------------------|----------------|-----------------|--------------------|---|---------------|----------------|----------------------------------|
|      |                         | First Name            |                  | Middle Name        | Las            | st Name         |                    |   |               |                |                                  |
| 26.  | Hav                     | e you been a part     | y in any judio   | cial or administ   | rative proce   | eding under     | any environmer     | ntal law? In                            | clude settler | ments and ord  | lers.                            |
|      | H                       | Yes. Fill in the det  | tails            |                    |                |                 |                    |   |               |                |                                  |
|      | ш                       | 100.1 111 111 110 110 | iciio.           |                    | Caust as an    |                 |                    | Noture                                  | of the ease   |                | Ctatus of the                    |
|      |                         |                       |                  |                    | Court or ag    | ency            |                    | Nature (                                | of the case   |                | Status of the case               |
|      |                         | Case title            |                  |                    |                |                 |                    |   |               |                |                                  |
|      |                         |                       |                  |                    |                |                 |                    |   |               |                | Pending                          |
|      |                         |                       |                  |                    | Court Name     |                 |                    |   |               |                |                                  |
|      |                         | Case number           |                  |                    | NumberStree    | et              |                    |   |               |                | On appeal                        |
|      |                         | 0400                  |                  |                    |                |                 |                    |   |               |                | Concluded                        |
|      |                         |                       |                  |                    | City           | State           | Zip Code           |   |               |                | _                                |
| B    |                         | Civa Dataila Al       | acut Vaur E      | Pusiness or C      | annaatiana     | to Amy Du       | olmana             |   |               |                |                                  |
| Part | t 11:                   | Give Details Al       | bout Your E      | business or C      | onnections     | io Any bu       | siness             |   |               |                |                                  |
| 27   | With                    | nin 4 years before    | you filed for    | hankruntev di      | d vou own a    | husiness or     | have any of the    | following c                             | onnections t  | o any husines  | s?                               |
|      | *****                   | iii 4 years belore    | you med for      | bankruptoy, ui     | a you own a    | business of     | nave any or the    | ionowing o                              | omicotions t  | o any basines  | <b>.</b>                         |
|      |                         | A sole propri         | ietor or self-e  | mployed in a tr    | ade, profess   | sion, or othe   | activity, either f | full-time or p                          | oart-time     |                |                                  |
|      |                         | A member of           | f a limited liak | oility company (   | LLC) or limite | ed liability pa | artnership (LLP)   |   |               |                |                                  |
|      |                         | A partner in a        | a partnershir    | )                  |                |                 |                    |   |               |                |                                  |
|      |                         | ш .                   |                  | naging executi     | ve of a corp   | oration         |                    |   |               |                |                                  |
|      |                         | _                     |                  | of the voting or   | -              |                 | acration           |   |               |                |                                  |
|      |                         | An owner or           | at least 5% (    | or the voting or   | equity securi  | ues or a corp   | Joranori           |   |               |                |                                  |
|      | $\overline{\mathbf{A}}$ | No. None of the a     | above applie     | s. Go to Part 12   | 2.             |                 |                    |   |               |                |                                  |
|      | Ħ                       | Yes. Check all tha    | at apply abo     | ve and fill in the | e details belo | w for each b    | ousiness.          |   |               |                |                                  |
|      | ш                       |                       | ,                |                    |                |                 | ire of the busine  | 200                                     | Employer I    | dentification  | number Do not                    |
|      |                         |                       |                  |                    | 2000.          | 100 1110 11411  | ino or this busine | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |               |                | number or ITIN.                  |
|      |                         |                       |                  |                    |                |                 |                    |   | EIN:          |                |                                  |
|      |                         | Business Name         |                  |                    |                |                 |                    |   | LIIV.         |                |                                  |
|      |                         |                       |                  |                    |                |                 |                    |   |               |                |                                  |
|      |                         | Number Street         |                  |                    | Nome           |                 |                    |   | Dates busi    | iness existed  |                                  |
|      |                         | O:+ ·                 | Otata            | 7:- 0              |                | or account      | ant or bookkeep    | ber                                     | _             | _              |                                  |
|      |                         | City                  | State            | Zip Code           |                |                 |                    |   | From          | То             |                                  |
|      |                         |                       |                  |                    |                |                 |                    |   |               |                |                                  |
|      |                         |                       |                  |                    |                |                 |                    |   |               |                |                                  |
|      |                         |                       |                  |                    | Dosor          | iho tho nati    | are of the busine  | ) CC                                    | Employer I    | Identification | number Do not                    |
|      |                         |                       |                  |                    | Desci          | ibe the natt    | ire or the busine  | 733                                     |               |                | number or ITIN.                  |
|      |                         |                       |                  |                    |                |                 |                    |   | EINI:         |                |                                  |
|      |                         | Business Name         |                  |                    |                |                 |                    |   | EIN:          |                |                                  |
|      |                         | -                     |                  |                    |                |                 |                    |   |               |                |                                  |
|      |                         | Number Street         |                  |                    | <b>.</b>       |                 | amt au le! ! .     |   | Dates busi    | iness existed  |                                  |
|      |                         | 0::                   | 0                | 7: 0 1             | Name           | or account      | ant or bookkeep    | per                                     |               |                |                                  |
|      |                         | City                  | State            | Zip Code           |                |                 |                    |   | From          | To             |                                  |
|      |                         |                       |                  |                    |                |                 |                    |   |               |                |                                  |
|      |                         |                       |                  |                    |                |                 |                    |   |               |                |                                  |
|      |                         |                       |                  |                    | Danas          |                 |                    |   | Faralana I    |                |                                  |
|      |                         |                       |                  |                    | Descr          | ibe the nati    | ire of the busine  | ess                                     |               |                | number Do not<br>number or ITIN. |
|      |                         |                       |                  |                    |                |                 |                    |   |               | 5.a. 555a, .   |                                  |
|      |                         | Business Name         |                  |                    |                |                 |                    |   | EIN:          |                |                                  |
|      |                         |                       |                  |                    |                |                 |                    |   |               |                |                                  |
|      |                         | Number Street         |                  |                    |                |                 |                    |   | Dates busi    | iness existed  |                                  |
|      |                         |                       |                  |                    | Name           | of account      | ant or bookkeep    | per                                     |               |                |                                  |
|      |                         | City                  | State            | Zip Code           |                |                 |                    |   | From          | To             |                                  |
|      |                         |                       |                  |                    |                |                 |                    |   |               |                |                                  |
|      |                         |                       |                  |                    |                |                 |                    |   |               |                |                                  |
|      |                         |                       |                  |                    |                |                 |                    |   |               |                |                                  |

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| Debtor   | r 1 Latasha     |                    | L.                   | Conley                        | Case number (if known)   |
|----------|-----------------|--------------------|----------------------|-------------------------------|--|
|          | First Name      |                    | Middle Name          | Last Name                     |  |
|          | reditors, or ot |                    | r bankruptcy, did y  | ou give a financial statem    | ent to anyone about your business? Include all financial institutions,   |
|          | _               |                    |                      | Date issued                   |  |
|          |                 |                    |                      | Date Issueu                   |  |
|          | Name            |                    |                      | MM/DD/YYYY                    | -  |
|          | Number          | Street             |                      |                               |  |
|          | City            | State              | Zip Code             | _                             |  |
|          |                 |                    | •                    |                               |  |
| Part 1   | 2: Sign Belo    | ow                 |                      |                               |  |
| tru      | e and correct   | . I understand tha | t making a false sta | atement, concealing prope     | nents, and I declare under penalty of perjury that the answers are erty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
|          | ×               | /s/ Latasha Co     | a lov                |                               | ×  |
|          |                 | Signature of Debto |                      |                               | Signature of Debtor 2  |
|          |                 | g                  |                      |                               | Date   |
|          |                 | Date 12/16/2017    |                      |                               | Date   |
| Dic      | d vou attach a  | dditional pages to | Your Statement o     | f Financial Affairs for Indiv | iduals Filing for Bankruptcy (Official Form 107)?  |
|          | _               |                    |                      |                               | , (e,,,,,,   |
| <u> </u> | No              |                    |                      |                               |  |
|          | Yes             |                    |                      |                               |  |
| Dic      | d you pay or aç | gree to pay some   | one who is not an a  | ttorney to help you fill out  | bankruptcy forms?  |
| <b>✓</b> | No              |                    |                      |                               |  |
|          | Yes. Name of    | person             |                      |                               | Attach the Bankruptcy Petition Preparer's Notice,<br>Declaration, and Signature (Official Form 119).   |

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B2030 (Form 2030) (12/15)

### **UNITED STATES BANKRUPTCY COURT**

|    |  | Northern Distri                         | ct of Illinois   |                                 |
|----|--|---|--|---------------------------------|
| re | Latasha L. Conley  |   | Case No.   |                                 |
| _  | Debtor   |   |  | (If known)                      |
|    |  |   | Chapter  | Chapter 13                      |
|    | DISCLOSURE OF  | COMPENSATIO                             | N OF ATTORNEY F  | OR DEBTOR                       |
| 1  | Pursuant to 11 U.S.C. § 329(a) and compensation paid to me within one rendered or to be rendered on behalt | e year before the filing of the         | petition in bankruptcy, or agreed to   | be paid to me, for services     |
|    | For legal services, I have agreed to a   | ccept                                   |  | \$4,000.00                      |
|    | Prior to the filing of this statement I  | have received                           |  | \$300.00                        |
|    | Balance Due  |   |  | \$3,700.00                      |
| 2  | The source of the compensation pai   | d to me was:                            |  |                                 |
|    | <b>✓</b> Debtor  | Other (specify)                         |  |                                 |
| 3  | The source of the compensation pai   | d to me is:                             |  |                                 |
|    | <b>✓</b> Debtor  | Other (specify)                         |  |                                 |
| 4  | I have not agreed to share the all members and associates of my  | oove-disclosed compensatio<br>law firm. | n with any other person unless the   | ey are                          |
|    |  | w firm. A copy of the agreem            | ith a other person or persons who a<br>ent, together with a list of the name |                                 |
| 5  | In return for the above-disclosed fee  | e, I have agreed to render lega         | al service for all aspects of the bank                                       | kruptcy case, including:        |
|    | <ul> <li>a. Analysis of the debtor's final bankruptcy;</li> </ul>  | ncial situation, and rendering          | advice to the debtor in determinin   | g whether to file a petition in |
|    | b. Preparation and filing of any   | petition, schedules, stateme            | ents of affairs and plan which may b   | pe required;                    |
|    | c. Representation of the debtor  | at the meeting of creditors a           | and confirmation hearing, and any a  | adjourned hearings thereof;     |
|    | d. Representation of the debtor  | in adversary proceedings ar             | nd other contested bankruptcy mat  | ters;                           |
| 6  | By agreement with the debtor(s), the   | above-disclosed fee does n              | ot include the following services:   |                                 |
|    |  |   |  |                                 |
|    |  | CERTIFIC                                | ATION  |                                 |
|    | certify that the foregoing is a comple or(s) in this bankruptcy proceedings.                               | te statement of any agreeme             | nt or arrangement for payment to n   | ne for representation of the    |
|    | 12/16/2017   |   | /s/ Jason Diaz   |                                 |
|    | Date   |   | Signature of Attorney  |                                 |
|    |  |   | Semrad Law Firm  |                                 |
|    |  | _                                       | Name of law firm   |                                 |

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

### **Chapter 7: Liquidation**

|   | \$245 | filing fee         |
|---|-------|--------------------|
|   | \$75  | administrative fee |
| + | \$15  | trustee surcharge  |
|   | \$335 | total fee          |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### Chapter 11: Reorganization

|   | \$1,167 | filing fee         |
|---|---------|--------------------|
| + | \$550   | administrative fee |
|   | \$1 717 | total fee          |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

|   | \$200 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$275 | total fee          |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

### Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://www.justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://www.justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to:
<a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a>
20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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### **UNITED STATES BANKRUPTCY COURT**

**Northern District of Illinois** 

| In re:          | Conley, Latasha L. | Case No.                                      | Case No.                            |  |  |
|-----------------|--------------------|---|-------------------------------------|--|--|
| Debtor(s)       |                    |   |                                     |  |  |
|                 |                    | Chapter.                                      | Chapter13                           |  |  |
|                 | VERIFI             | CATION OF CREDITOR MAT                        | RIX                                 |  |  |
| Ti<br>knowledge |                    | fy that the attached list of creditors is tru | ue and correct to the best of their |  |  |
| Date:           | 12/16/2017         | /s/ Conley, Latasl                            |                                     |  |  |
|                 |                    | Conley, Latasha I<br>Signature of Debi        |                                     |  |  |

BMW FIN SVC PO BOX 3608 DUBLIN, OH, 43016

CHRYSLER Capital 91 WALL STREET POB 666 MADISON, CT, 06443

LVNV FUNDING LLC PO Box 10587 Greenville, SC, 29603

MERRICK BANK CORP PO Box 10368 c/o Susan Gaines Greenville, SC, 29603

FIRST PREMIER BANK c/o Jefferson Capital Systems LLC PO Box 7999 c/o Linda Dold Saint Cloud, MN, 56302

TD BANK USA/TARGETCRED PO Box 660170 Dallas, TX, 75266

CAVALRY PORTFOLIO SERV 4050 E COTTON CENTER BLV PHOENIX, AZ, 85040

PORTFOLIO RC 120 Corporate Boulevard Norfolk, VA, 23502

MIDNIGHT VELVET PO Box 740933 Dallas, TX, 75374

MIDLAND FUNDING PO Box 13105 Roanoke, VA, 24031

GINNYS PO Box 800849 Dallas, TX, 75380 City of Chicago Parking 121 N. LaSalle St # 107A Chicago, IL, 60602

Illinois Tollway PO Box 5544 Chicago, IL, 60680

ComEd 1919 Swift Drive Oak Brook, IL, 60523

Peoples Gas Light & Coke Co. 200 E. Randolph St. Chicago, IL, 60601

#### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

### RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

#### A. BEFORE THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

#### THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

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6. Advise the debtor of the need to maintain appropriate insurance.

#### B. AFTER THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

#### THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.

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- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

### C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

#### D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

  Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

#### E. CONDUCT AND DISCHARGE

- 1. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

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### F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$371.76
- 3. Before signing this agreement, the attorney has received, \$300.00 toward the flat fee, leaving a balance due of \$3,700.00; and \$61.76 for expenses, leaving a balance due of \$4,071.76
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date: 12/16/2017   |                        |
|--------------------|------------------------|
| Signed:            |                        |
| /s/ Katasha Conley |                        |
| Katah. Centr       | /s/ Jason Diaz         |
| Debtor(s)          | Attorney for Debtor(s) |
|                    |                        |

Do not sign if the fee amounts at top of this page are blank.

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| Debtor 1 Latasha<br>First Name   |  |  | ase number (if known)  |                         |
|--|--|--|--|-------------------------|
|  | ****   | st Name  |  |                         |
| คลามอัล Answer These Qu  | estions for Reporting Purposes   |  |  |                         |
| <sup>16</sup> . What kind of debts do<br>you have?   | "incurred by an individual p No. Go to line 16b. Yes. Go to line 17.  16b. Are your debts primarily b  | primarily for a personal, for a personal pers | umer debts are defined in 11 U.S.C. § 101(in amily, or household purpose."  See a debts are debts that you incurred to obtain operation of the business or investment.  The debts or business debts. |                         |
| 17. Are you filing under<br>Chapter 7?<br>Do you estimate that<br>after any exempt   | No. I am not filing under Chapter 7  Yes. I am filing under Chapter 7  expenses are paid that fur  | 7. Do you estimate that after  | any exempt property is excluded and adminisibute to unsecured creditors?   | strative                |
| property is excluded<br>and administrative<br>expenses are paid that<br>funds will be available<br>for distribution to<br>unsecured creditors? | No. Yes.   |  |  |                         |
| <sup>18.</sup> How many creditors  | <b>7</b> 1-49  | 1,000-5,000  | 25,001-50,000  |                         |
| do you estimate that   | <b>[</b> ] 50-99   | 5,001-10,000   | 50,001-100,000   |                         |
| you owe?   | 100-199<br>200-999   | 10,001-25,000  | More than 100,000  |                         |
| <sup>19.</sup> How much do you<br>estimate your assets   | ▼ \$0-\$50,000<br>□ \$50,001-\$100,000   | ☐ \$1,000,001-\$10<br>☐ \$10,000,001-\$5   | 50 million   | ) billion               |
| to be worth?   | \$100,001-\$500,000<br>\$500,001-\$1 million   | [] \$50,000,001-\$1<br>[] \$100,000,001-\$   | Empays   |                         |
| <sup>20.</sup> How much do you<br>estimate your<br>liabilities to be?  | \$0-\$50,000<br>\$50,001-\$100,000<br>\$100,001-\$500,000  | \$1,000,001-\$10<br>\$10,000,001-\$5<br>\$50,000,001-\$1   | 50 million \$1,000,000,001-\$10<br>100 million \$10,000,000,001-\$5  | ) billion<br>50 billion |
| Cinn Patan   | \$500,001-\$1 million  | \$100,000,001-\$   | More than \$50 billion   | 1                       |
| Part 78 Sign Below   | They are averaged this patition are  | A declare under executiv   |  |                         |
| For you  | correct.   | i i declare under penalty i  | of perjury that the information provided is  | true and                |
|  | If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.                |  |  |                         |
|  | If no attorney represents me and out this document, I have obtained  |  | pay someone who is not an attorney to hel<br>quired by 11 U.S.C. § 342(b).   | p me fill               |
|  |  |  | Inited States Code, specified in this petition   | n.                      |
|  | I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |  |  |                         |
|  | /s/ Latasha Conlex Signature of Debtor 1   | ash. Canh  | Signature of Debtor 2  | <del></del>             |
|  | Executed on 12/16/2017<br>MM / DD /  | YYYY   | Executed onMM / DD / YYYY  |                         |

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| Fill in this info                      | mation to identify you                            | case:                         |   |  |
|--|---|-------------------------------|---|--|
| Debtor 1                               | Latasha   | L.                            | Conley  |  |
| ************************************** | First Name  | Middle Name                   | Last Name   | Manager  |
| Debtor 2                               |   |                               |   |  |
| (Spouse, if filing)                    | First Name  | Middle Name                   | Last Name   |  |
| United States I                        | Bankruptcy Court for the                          | e: Northern                   | District of Illinois                                    |  |
|  |   |                               | (State)   |  |
| Case number (If known)                 | A   |                               |   |  |
| I                                      |   |                               |   |  |
| Official                               | Form 106D   | ec                            |   | amended filing   |
|  | <del></del>                                       | <del>,,,,,,,,,,</del>         |   |  |
| Declarat                               | ion About ar                                      | ı Individual Debt             | or's Schedules  | 12/15  |
| If two married                         | people are filing toge                            | ther, both are equally respon | nsible for supplying correc                             | t information  |
|  |   |                               |   |  |
| money or prop-                         | erty by fraud in conne<br>1341, 1519, and 3571    | ction with a bankruptcy cas   | or amended schedules, Ma<br>e can result in fines up to | aking a false statement, concealing property, or obtaining<br>\$250,000, or imprisonment for up to 20 years, or both, 18 |
| Partie Sign                            | ı Below   |                               |   |  |
|  |   | neone who is NOT an attorn    | ey to help you fill out bank                            | ruptcy forms?  |
| Z No                                   |   |                               |   |  |
| Yes.                                   | Name of person                                    |                               | Attach Bankruptcy F                                     | Petition Preparer's Notice, Declaration, and   |
| Siconcoli                              |   |                               | Signature (Official Fo                                  | om 119).   |
|  |   |                               |   |  |
|  |   |                               |   |  |
|  |   |                               |   |  |
|  |   |                               |   |  |
|  | nalty of perjury, I decl<br>are true and correct. | are that I have read the sum  | mary and schedules filed                                | with this declaration and  |
|  | ha Conley   | The Call                      | ×   |  |
| Signature of                           |   | were or married               | ***************************************                 | of Debtor 2  |

MM/DD/YYYY

Date

Date 12/16/2017 MM/DD/YYYY

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| Debtor     | r 1 Latasha   | L.  | Conley                      | Case number (if known)  |
|------------|---|---|-----------------------------|---|
|            | First Name  | Middle Name   | Last Name                   |   |
| 28. V      | Vithin 2 years before you creditors, or other parties  No Yes. Fill in the details be |   | /ου give a financial state  | ment to anyone about your business? Include all financial institutions,   |
|            |   |   | Date issued                 |   |
|            | Name  | ***************************************                         | MM/DD/YYYY                  | <del></del>   |
|            | Number Street   |   | ******                      |   |
|            | City St   | ate Zip Code  |                             |   |
| Partel     | a Sign Below  | ·   |                             |   |
| tru        | e and correct. I understa<br>ankruptcy case can resu                                  | nd that making a false stite in fines up to \$250,000 ha Conley | atement, concealing pro     | ments, and I declare under penalty of perjury that the answers are perty, or obtaining money or property by fraud in connection with to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.  Signature of Debtor 2 |
|            | Date 12/16/   | 2017  |                             | Date  |
| Did        | l you attach additional pa  | ges to Your Statement o   | f Financial Affairs for Ind | ividuals Filing for Bankruptcy (Official Form 107)?   |
|            | No<br>Yes   |   |                             |   |
| Did        | you pay or agree to pay   | someone who is not an a   | ttorney to help you fill o  | ut bankruptcy forms?  |
| <b>[</b> ] | No  |   |                             |   |
|            | Yes. Name of person   |   |                             | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)  |

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### **UNITED STATES BANKRUPTCY COURT**

Northern District of Illinois

| In re:          | Conley, Latasha L.                    | Case No  |                                     |
|-----------------|---------------------------------------|--|-------------------------------------|
|                 | Debtor(s)                             |  |                                     |
|                 |                                       | Chapter.   | Chapter13                           |
|                 | VERI                                  | FICATION OF CREDITOR MAT                                 | <b>TRIX</b>                         |
| TI<br>knowledge | he above named Debtors hereby v<br>e. | erify that the attached list of creditors is tr          | ue and correct to the best of their |
| Date:           | 12/16/2017                            | /s/ Conley, Latas<br>Conley, Latasha<br>Signature of Deb |                                     |

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| Debt   | or 1 Latasha<br>First Name                                | L  | Conley<br>Last Name  | Case number (if known)   |              |
|--------|---|--|--|--|--------------|
| 16.    | Calculate the median f                                    | amily income that applies to   | ou. Follow these stens:  |  |              |
|        | 16a. Fill in the state in w                               |  | Iflinois   |  |              |
|        | 16b. Fill in the number o                                 | f people in your household.  | 5  |  |              |
|        |   | mily income for your state and s   | the second secon |  | \$102,872.00 |
|        | household<br>using the link specil                        | ied in the separate instructions f   | To find a<br>or this form. This list may   | i list of applicable median income amounts, go online<br>also be available at the bankruptcy clerk's office.   |              |
| 17.    | How do the lines comp                                     |  |  | and so are more supply orders of the control of the |              |
|        | 17a. Line 15b is less<br>under 11 U.S.C                   | than or equal to line 16c. On th<br>C. <i>§ 1325(b)(3)</i> . <b>Go to Part 3.</b> D  | e top of page 1 of this for NOT fill out Calculation   | orm, check box 1, <i>Disposable income is not determined</i> of <i>Disposable Income</i> (Official Form 122C-2).   |              |
|        | U.S.C. § 1325(  | re than line 16c. On the top of p<br>b/(3). Go to Part 3 and fill out<br>r current monthly income from li  | Calculation of Disposal  | box 2, Disposable income is determined under 11 ble Income (Official Form 122C-2). On line 39 of that  |              |
| Part   | Calculate Your Co   | ommitment Period Under   | 11 U.S.C. §1325(b)(  | 4)   |              |
| 18.    |   | monthly income from line 11  | the state of the state of the state of the state of  |  | \$2,403.75   |
| 19.    | Deduct the marital adju<br>commitment period under        | istment if it applies. If you are r 11 U.S.C. § 1325(b)(4) allows  | married, your spouse is i<br>you to deduct part of yo  | not filing with you, and you contend that calculating the<br>or spouse's income, copy the amount from line 13.   | -            |
|        | 19a. If the marital adjustn                               | nent does not apply, fill in 0 on i  | îne 19a.   |  | -\$0.00      |
|        | 19b. Subtract line 19a f                                  | rom line 18.   |  |  | \$2,403.75   |
| 20.    | Calculate your current                                    | monthly income for the year. I   | Follow these steps:  |  |              |
|        | 20a, Copy line 19b.                                       |  |  |  | \$2,403.75   |
|        | Multiply by 12 (the r                                     | number of months in a year).   |  |  | x 12         |
|        | 20b. The result is your cu                                | rrent monthly income for the yea   | ar for this part of the form   |  | \$28,845.00  |
|        | 20c. Copy the median far                                  | nily income for your state and si  | ze of household from lin-  | a 16c.   | \$102,872.00 |
| 21.    | How do the lines compa                                    | ire?   |  |  |              |
|        | Line 20b is less than commitment period is                | fine 20c. Unless otherwise order<br>s 3 years. Go to Part 4.   | ed by the court, on the t  | op of page 1 of this form, check box 3, The  |              |
|        | Line 20b is more that<br>4, The commitment p              | n or equal to line 20c. Unless of period is 5 years. Go to Part 4.   | nerwise ordered by the co  | ourt, on the top of page 1 of this form, check box   |              |
| Part d | Sign Below  |  |  |  |              |
|        | By signing here, I dec                                    | lare under penalty of periury that   | the information on this  | statement and in any attachments is true and correct.  |              |
|        | , , ,   | 120110   | v /:   | sate and in any sate and conect.   |              |
|        | 🗶 /s/ Latasha Co  | the state of the s | ally x   |  |              |
|        | Signature of Debi   | or 1( )  | Sig  | nature of Debtor 2   |              |
|        | Date 12/16/201  |  | Da   |  |              |
|        | MM/DD/YY  |  |  | MM/DD/YYYY   |              |
|        | If you checked 17a, d<br>If you checked 17b, fi<br>above. | o NOT fill out or file Form 1220<br>Il out Form 1220-2 and file it wi  | -2.<br>th this form. On line 39 o  | of that form, copy your current monthly income from line   | s 14         |